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To:
Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305) 672-0686
Fax Number : (305) 672-9110

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02 DEC 20 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

DISSOLUTION LAKE WORTH 441, INC.

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ARTICLES OF DISSOLUTION
OF
LAKE WORTH 441, INC.,
a Florida corporation

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the Corporation is LAKE WORTH 441, INC.
2. The name and address of its Officers are:

GERALD M. HIGIER	-	President, Vice
1541 Sunset Drive		President, Secretary
Suite 300		and Treasurer
Coral Gables, Florida 33143		

3. The name and address of the sole Director of the Corporation is:

GERALD M. HIGIER
1541 Sunset Drive
Suite 300
Coral Gables, Florida 33143

4. All debts, obligations and liabilities of the Corporation have been paid or discharged or adequate provision has been made therefor.

5. All the remaining property and assets of the Corporation have been distributed to the sole Shareholder as set forth on the Written Consent attached hereto and made a part hereof.

6. There are no actions pending against the Corporation in any court. Further, the Corporation has no intention of revoking this voluntary dissolution, and the Corporation's name is immediately available for use by any other corporation.

7. Dissolution of the Corporation was approved by the sole Shareholder on December 19, 2002.

8. The dissolution was approved by the sole Shareholder and such vote was sufficient for dissolution. The Written Consent to Dissolve signed by the sole Shareholder is attached hereto as Exhibit A.

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DATED this 1st day of December, 2002.

Gerald M. Higler, President

Gerald M. Higier, Secretary

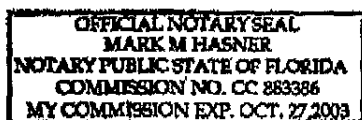
STATE OF FLORIDA:

53:

COUNTY OF MIAMI-DADE:

The foregoing instrument was acknowledged before me this 19
day of December , 2002 by GERALD M. HIGIER, President and
Secretary of LAKE WORTH 441, INC., a Florida corporation, who is
personally known to me or who has produced _____ as
identification.

Notary Public, State of Florida
at Large



Type/Print/or Stamp Name of Notary

My Commission Expires:

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