POOOOOIU291

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

200003131182--0 -02/10/00--01076--012 *****70.00 ******70.00

SUBJECT:	THE PLEASURE WITARDS INC.		
	(Proposed corporate name - must include suffix)		

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

378.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: BRUCE WE WTRAUB Name (Printed or typed)		
	1934 ORLEANS DRIVE / SVITE P	
	TWOIALANTIC FC 32903 City, State & Zip	
	321-777-5456	

SECRETARY OF STATE

Torrection notice

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

als 2/16

ARTICLES OF INCORPORATION

FILED

2000 FEB 10 AM 8 00

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLE	I	NAME
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The name of the corporation shall be:

THE PLEASURE WIZARDS, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1934 ORLEANS DRIVE /SUITE F IN DIALANTIE, FC 32503

ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

BRUCE WEINTANDS 1934 ORLEANS BR- /SUITE F INDINCANTIC, FL 32903

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

BRUCE WEINTHARB 1934 ORLEANS, DRIVE (SUITE) INDINCANTIE, FL 34903

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

02-07-00