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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : CHEVOLO ACCOUNTING, INC.
Account Number : I20000000167
Phone : (954) 777-0082
Fax Number : (954) 777-0062

FLORIDA PROFTT CORPORATION OR P.A.

CARIBBEAN TASTE & DELI, INC.

Certificate of Status	0
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DIVISION OF CORPORATIONS
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B. McKnight AUG 01 2000

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**ARTICLES OF INCORPORATION
OF**

CARIBBEAN TASTE & DELI, INC.

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

ARTICLE I NAME

The name of the corporation shall be: **CARIBBEAN TASTE & DELI, INC.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and the mailing address of this corporation shall be:
9590 N W 21st MANOR, SUNRISE, FLORIDA 33322

ARTICLE III NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities of business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
**TEN THOUSAND (10,000) SHARES OF COMMON STOCK WITH A PAR VALUE OF ONE
DOLLAR (\$1.00) PER SHARE.**

ARTICLE V TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI OFFICERS DIRECTORS

The names and street address of the initial officers and director are:
CAROLYN SWABY - 9590 N W 21st MANOR, SUNRISE, FL 33322
President / Director / Treasurer

EARL SWABY - 9590 N W 21st MANOR, SUNRISE, FL 33322
Vice President / Director/ Secretary

ARTICLE VII INCORPORATORS

The name and address of the incorporator of these Articles of Incorporation is:
CAROLYN SWABY - 9590 N W 21st MANOR, SUNRISE, FL 33322

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IN WITNESS WHEREOF, the undersigned incorporator have executed these Articles of Incorporation this:

31st Day of July, 2000

Carolyn Swaby
Signature

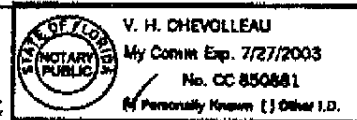
STATE OF FLORIDA
COUNTY OF BROWARD

THE FOREGOING instrument was acknowledged and sworn to before me this 31st
day of July, 2000, by Ms. Carolyn Swaby
of CARIBBEAN TASTE & DELI, Inc

Notary Public V. H. Chevolleau

My Commission Expires: _____

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE**



Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office / registered agent, in the State of Florida.

1. The name of the corporation is: **CARIBBEAN TASTE & DELI, INC.**

2. The name and address of the registered agent and officer is:

CAROLYN SWABY

9590 N W 21st MANOR, SUNRISE, FLORIDA 33322

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 Carolyn Swaby

DATE 7/21/00

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