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September 19, 2000

FLORIDA DEPARTMENT OF STATE
DIVISION OF INCORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

900003416749--5
-10/05/00--01058--020
*****78.75 *****78.75

RE: LATIN FOOD SHOP, INC.
16502 NW 82nd. PLACE
MIAMI, FL. 33016

GENTLEMEN:

ENCLOSED PLEASE FIND THE ORIGINAL AND ONE COPY OF THE ARTICLES
OF INCORPORATION, TOGETHER WITH MY CHECK IN THE AMOUNT OF
\$78.75

THIS REPRESENTS THE COST OF THE FILLING FEES, CERTIFIED COPY OF
THE ARTICLES OF INCORPORATION AND FEE FOR REGISTERED AGENT
DESIGNATION FOR THE ABOVE NAMED CORPORATION.

VERY TRULY YOURS,


ROBERTO ALONSO

LATIN FOOD SHOP, INC.
16502 NW 82nd. PLACE
MIAMI, FL. 33016
TEL. (305)362-7362

FILED
00 OCT -6 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/10/9

ARTICLES OF INCORPORATION

of

LATIN FOOD SHOP, INC.

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

LATIN FOOD SHOP, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of common stock, par value \$ 1.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS		
<u>16502 NW 82ND PLACE</u>		
CITY	FLORIDA	ZIP
<u>MIAMI</u>		<u>33016</u>

Mailing address, if different

STREET ADDRESS		
<u>16502 NW 82ND PLACE</u>		
CITY	FLORIDA	ZIP
<u>MIAMI</u>		<u>33016</u>

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	<u>ROBERTO ALONSO</u>	
ADDRESS	<u>16502 NW 82ND PLACE</u>	
CITY	FLORIDA	ZIP
<u>MIAMI</u>		<u>33016</u>

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ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

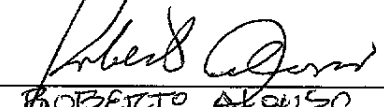
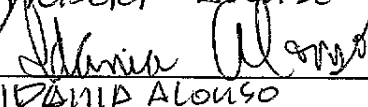
NAME	ROBERTO ALONSO		
ADDRESS	16502 NW 82ND PLACE		
CITY	MIAMI	STATE	FL. ZIP 33016
NAME	IDANIA ALONSO		
ADDRESS	16502 NW 82ND PLACE		
CITY	MIAMI	STATE	FL. ZIP 33016
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ROBERTO ALONSO		
ADDRESS	16502 NW 82ND PLACE		
CITY	MIAMI	STATE	FL. ZIP 33016
NAME	IDANIA ALONSO		
ADDRESS	16502 NW 82ND PLACE		
CITY	MIAMI	STATE	FL. ZIP 33016
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 19TH day of SEPTEMBER 2000.


 _____ (Signature)
 ROBERTO ALONSO

 _____ (Signature)
 IDANIA ALONSO
 _____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

LATIN FOOD SHOP, INC.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation

at 16502 NW 82ND PLACE

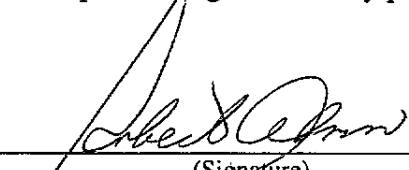
MIAMI FL 33016

has named ROBERTO ALONSO

located at the aforesaid address, as its registered agent to accept service of process in this
state.

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00 OCT -6 AM 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 regis-
tered 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)
ROBERTO ALONSO

9/19/2000
(Date)