OFFICEUSE ONLY (Upon mental) EXPRESS CORPORATE FILING (Requestor's Name)	SERVICE INC.	146	33/
(Address)			TALL
MIAMI, FLORIDA 33134 (305)444-4994 (City, State, Zip) (Phone #)			
		OFFICE USE ONLY	- SSEE
CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):			
	nvestments	INC.	
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2. (Corporation Name)	<u></u>	(Document #)	
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ARTICLES OF INCORPORATION

OF

CRYSTAL PLAZA INVESTMENTS, INC.

ARTICLE I - NAME

The name of this corporation is CRYSTAL PLAZA

INVESTMENTS, INC.

ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE III - ADDRESS

The mailing address of the corporation is 20225 N. E. 34

Avenue, Suite 1015, Aventura, Florida 33180.

ARTICLE IV - PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue ONE HUNDRED (100) shares of NO par value common stock, which shall be designated "Common Stock".

ARTICLE VI- PREEMPTIVE RIGHTS

and the control of th

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VII - INITIAL REGISTERED OFFICE AND AGENT

The street address of the principal office of this corporation is 20225 N. E. 34 Avenue, Apt. 1015, Aventura, Florida 33180, and the name of the initial registered agent of this corporation is SADIA CHOCRON.

ARTICLE VIII - 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 as provided in the bylaws but shall never be less than ONE.

The name and address of the initial directors of this corporation is:

SADIA CHOCRON 20225 N. E. 34 Avenue, Apt. 1015 Aventura, FL 33180

ELENA KASWAN 20225 N. E. 34 Avenue, Apt. 1015 Miami, FL 33180

ARTICLE IX - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer of director, to the full extent permitted by law.

ARTICLE X - INCORPORATOR

The name and address of the person signing these articles is:

SADIA CHOCRON

20225 N. E. 34 Avenue, Apt. 1015 Aventura, FL 33180

Sadia Chocron

STATE OF FLORIDA

COUNTY OF MIAMI-DADE)

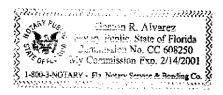
Before me, a Notary Public authorized to take acknowledgments in the state and county set forth above, personally appeared SADIA CHOCRON, personally known to me or who produced KNOWN as identification, and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this day of November 2000.

Notary Public, State of Florida at Large 6ASTON R. AIVAREZ

Printed Notary Signature

My commission expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with Section 607.0501 of the Florida Statutes, the following is submitted:

CRYSTAL PLAZA INVESTMENTS, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of Miami, County of Miami-Dade, State of Florida, has named SADIA CHOCRON, located at 20225 N.E. 34 Avenue, Apt. 1015, Aventura, County of Miami-Dade, State of Florida 33180, as its agent to accept service of process within the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in this Certificate, I hereby agree 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.

DATED this 6th day of NOVEMBER, 2000.

Sadia Chocron

Resident and Registered Agent