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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

FLORIDA PROFIT CORPORATION OR P.A.

INTEGRAL CELLULITE AND ASTHETIC CENTER, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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H 01000021500**ARTICLES OF INCORPORATION
OF:****INTEGRAL CELLULITE AND ASTHETIC CENTER, INC.**

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

ARTICLE I - NAME

The name of the corporation shall be:

INTEGRAL CELLULITE AND ASTHETIC CENTER, INC.

ARTICLE II - PRINCIPAL OFFICE

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

***1310 SW 160TH AVENUE
SUNRISE, FL 33326***

ARTICLE III - CAPITAL STOCK

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

One Thousand (1000)

ARTICLE IV - REGISTERED AGENT AND ADDRESS

The name and address of the registered agent is:

***JOSE G. MARCANO
4478 Maurice Drive
Delray Beach, FL 33445***

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Prepared by:
Firmo Maldonado c/o Hitech-Tax
254 N. State Road 7 (441)
Margate, FL 33063
Phone (954) 344-3555

ARTICLE V - INCORPORATOR(S)

The name and address of the incorporator to these articles of incorporation is:

JOSE G. MARCANO
4478 Maurice Drive
Delray Beach, FL 33445

The undersigned has(have) executed these Articles of Incorporation this 24th day of February, 2001.



JOSE G. MARCANO/President



JOSE G. MARCANO/Secretary

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT
REGISTERED OFFICE**

Pursuant to the provisions of section 607-0501, 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:

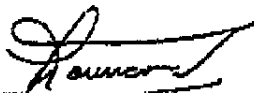
INTEGRAL CELLULITE AND ASTHETIC CENTER, INC.

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

***JOSE G. MARCANO
4478 Maurice Drive
Delray Beach, FL 33445***

I hereby am familiar with and accept the duties and responsibilities as Registered Agent.

Signature:


(Corporate Officer)

Title: President

Date: February 24th, 2001

H 01000021500**ACCEPTANCE OF REGISTERED AGENT**

Having been named as registered agent and to accept service of process at for the above stated corporation at the place designated in these Articles of Incorporation, 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: _____

Date: February 24th, 2001

FILED
01 FEB 27 AM 9:48
CLERK OF STATE
TALLAHASSEE, FLORIDA

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