

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : SERBER & ASSOCIATES, P.A.
Account Number : 120000000083
Phone : (305) 932-6262
Fax Number : (305) 933-9393

FLORIDA PROFIT CORPORATION OR P.A.
CASITA INVESTMENT CORP.

Certificate of Status	1
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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION OF
CASITA INVESTMENT CORP.

ARTICLE I.

CORPORATE NAME

The name of this corporation shall be:

CASITA INVESTMENT CORP.

ARTICLE II.

NATURE OF CORPORATE BUSINESS

The Corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE III.

CAPITAL STOCK

This Corporation is authorized to issue a maximum of One Thousand (1,000) shares of common stock having a par value of One Dollars (\$1.00) per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE IV.

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Isaac Hop
5644 Escondido Blvd.
St. Petersburg, FL 33715

ARTICLE V.

MAILING ADDRESS OF CORPORATION

The Corporation's mailing address shall be:

5644 Escondido Blvd.
St. Petersburg, FL 33715

ARTICLE VI.

BOARD OF DIRECTORS

The number of Directors may be altered from time to time by By-Laws adopted by the Stockholders. However, the Corporation shall have no less than one (1) Director at any time.

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ARTICLE VII.

INITIAL DIRECTOR

The name and post office address of the first Director of the Corporation is:

Name	Address
Isaac Hop	5644 Escondido Blvd. St. Petersburg, FL 33715

The first Director shall hold office until the first annual meeting of the Stockholders of the Corporation.

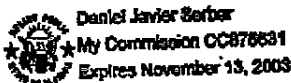
THE UNDERSIGNED Incorporator, for the purpose of forming a Corporation to do business within the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.


Isaac Hop

STATE OF FLORIDA :
: SS
COUNTY OF MIAMI-DADE :

BEFORE ME, the undersigned authority, appeared Isaac Hop who is personally known to me or who has produced _____ as identification, and acknowledged that he executed said Articles of Incorporation, and who did take an oath.

WITNESS my hand and seal in the State and County aforesaid, this ____ day April, 2001.




NOTARY PUBLIC, State of Florida

Print Name: Daniel J. Serber

My Commission Expires:

The undersigned hereby accepts the foregoing designation as initial Registered Agent and agrees to comply with the provisions of law applicable to said designation.


Isaac Hop, Registered Agent

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