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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 : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA PROFIT CORPORATION OR P.A.

TRUE COLOURS, INC.

Certificate of Status	0
Certified Copy	<input checked="" type="checkbox"/>
Page Count	06
Estimated Charge	\$78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION
OF

TRUE COLOURS, INC.

The undersigned incorporators, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I
NAME

The name of the corporation shall be:

TRUE COLOURS, INC.

The principal place of business of this corporation shall be:

17021 North Bay Road, Suite #402, Sunny Isles, FL 33160

ARTICLE II
NATURE OF BUSINESS

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

Prepared by:
Martha Valverde 453 NE 210th Terrace, North Miami Beach, FL 33179

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TALLAHASSEE, FLORIDA

ARTICLE III
CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time shall be divided into 500 shares of common stock of ONE DOLLAR PAR VALUE.

ARTICLE IV
TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V
OFFICERS DIRECTORS

The names and street addresses of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until their successors are elected, are:

	Number of Shares
Israel D. Barski 17021 North Bay Rd, #402 Sunny Isles, FL 33160	167
Maria J. Caporalettti 3619 NE 207 th Street, #2215 Aventura, FL 33180	167
Sandra M. Chaud 19380 Collins Avenue, #504 Sunny Isles, FL 33160	166

ARTICLE VI
INCORPORATORS

The names and street addresses of the incorporators to this articles of incorporation are:

Israel D. Barski
17021 North Bay Road, #402
Sunny Isles, FL 33160

President

Maria J. Caporaletti
3619 NE 207th Street, #2215
Aventura, FL 33180

Vice-President

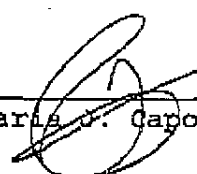
Sandra M. Chaud
19380 Collins Avenue, #504
Sunny Isles, FL 33160

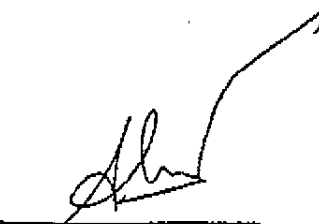
Treasurer

IN WITNESS WHEREOF, the undersigned incorporators have
executed these Articles of Incorporation this 17 day of
January, 2002.

Signature of Incorporators


Israel D. Barski


Maria J. Caporaletti


Sandra M. Chaud

ACKNOWLEDGEMENT

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

I HEREBY CERTIFY that on this 17th day of January, 2002 personally appeared before me, the undersigned Notary Public in and for the State of Florida, Israel D. Barski, Maria J. Caporaletti and Sandra M. Chaud parties to the foregoing Certificate of Incorporation, and acknowledged that they did make, and acknowledge the foregoing Certificate as and for their voluntary act and deed, and that the facts herein set forth are true and correct as given under my hand and official seal, the day and year written at Miami, Dade County, Florida,

Martha I. Valverde
Notary Public
State of Florida at Large

My commission expires:



Martha I. Valverde
Commission # 00 846236
Expires June 23, 2003
Elected, Third
Atlantic Bonding Co., Inc.

Subscribers:

Israel D. Barski

Maria J. Caporaletti

Sandra M. Chaud

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICEFILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.325, 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.

The name of the corporation:

TRUE COLOURS, INC.

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

Israel D. Barski

(P. O. BOX NOT ACCEPTABLE)

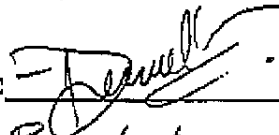
17021 North Bay Road, #402, Sunny Isles, FL 33160

(CITY/STATE/ZIP)

SIGNATURE

TITLE

DATE



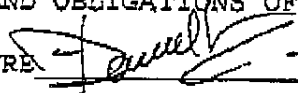
President

Jan 17/2002

HAVING BEEN NAME TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE



Jan 17, 2002

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