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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CARIONI MEDICAL EQUIPMENT CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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NEW FILINGS	
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<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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DIVISION OF CORPORATION

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Examiner's Initials

1/2 9/6

ARTICLES OF INCORPORATION
FOR

CARIONI Medical Equipment Corp.

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

ARTICLE I NAME

The name of the corporation shall be:

CARIONI Medical Equipment Corp.

ARTICLE II PRINCIPAL OFFICE

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

*6341 SW 80 ST Apt 3
Miami FL 33143*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

100

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

*ODALYS PEÑA
9020 NW 8 st Apt 316
Miami FL 33172*

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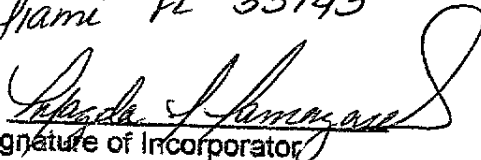
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ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

MAGDA LINA LAMAZARES
6341 SW 80 ST APT 3
Miami FL 33143


Signature of Incorporator


9-5-02
Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

(P) MAGDA LINA LAMAZARES 6341 SW 80 ST APT 3 Miami FL 33143
(S) ODALYS PEÑA 9020 NW 8th ST APT 316 Miami FL 33172

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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

Sep-05-02
Date

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