

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : ACE INDUSTRIES, INC.

Account Number : 070744001530 Phone : (305)358-2571

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SECRETARY OF STATE

# FLORIDA PROFIT CORPORATION OR P.A.

MARKET FOREX, CORP.

Certificate of Status	0
Certified Copy	1
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FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

December 31, 2002

ACE INDUSTRIES, INC.

SUBJECT: MARKET FOREX, CORP.

REF: WD2000036244

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that srticles of incorporation be executed by an incorporator.

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Tracy Smith Document Specialist New Filing Section FAX Aud. #: H02000242651 Letter Number: 402400068039

#### H02-242651

# **Articles of Incorporation**

Article 1: Name of Corporation: MARKET FOREX, CORP.

Address of Corporation: 3929 PONCE DE LEON BLVD.

CORAL GABLES, FL. 33134

Article 2: Capital Stock: The number of shares which the corporation has authorized

to be outstanding at any one time is 5,000, with a par value of \$20.00.

Article 3: REGISTERED AGENT: LUSKY & MOTOLA P.A.

REGISTERED OFFICE: 301 ALMERIA AVE. # 345
CORAL GABLES, FL. 33134

\*1 am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).

First listed is President, Second is Vice President, then Secretary/Treasurer.

1. CHOUCHANE MEHDI 33F VENETIAN WAY MIAMI BEACH, FL. 33139

2. LAZOFF RICARDO 3929 PONCE DE LEON BLVD. CORAL GABLES, FL. 33134

3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

CHOUCHANE MEHDI 33F VENETIAN WAY MIAMI, FL. 33139

In witness whereof, I have subscribed my name:

Signature of Incorporator

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