Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0381

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Phone Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

MIMI'S HAIR PLACE & BOUTIQUE CORP.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

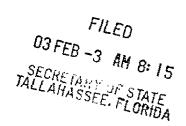
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ARTICLE OF INCORPORATION

QE

MIMI'S HAIR PLACE & BOUTIQUE CORP.



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

ARTICLE I NAME

The name of the corporation shall be: MIMI'S HAIR PLACE & BOUTIQUE CORP.

The principal place of business of this corporation shall be: 3850 W. 16 AVE.
HIALFAH, FL. 33012

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 State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 m s 10.00 = s 1.000.00

ARTICLE IV TERM OF REISTENCE

This corporation is to exist perpetually.

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ARTICLE Y OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

MYRNA M. MUNOZ 18711 NW. 84 PL. # 402 MIAMI,FL.33015 DIRECTOR

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

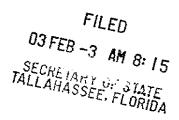
MYRNA M. MUNOZ 18711 NW. 84 PL. # 402 MTAMI.FL. 33015 PRESIDENT, SECRETARY & TREASURER 100 shares

The undersigned has (have) executed these Article of Incorporation this 31 th. day of January 2003.

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE



Pursuant to the provisions of sections 607.0501 or 617.0501, 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: |
|--------------|--|
| | MIMI'S HAIR PLACE & BOUTTQUE CORP. |
| | |
| 2. | The name and address of the registered agent and office |
| | is MYRNA M. MUNOZ |
| | (Name) |
| | 187}} NW. 84 Pl. # 402 |
| | (P. O. BOX NOT ACCEPTABLE) |
| | |
| | MIAMI, FLORIDA 33015 |
| | (CITY/STATE/ZIP) |
| | • |
| HAVI | NG BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE |
| of f As r | PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR |
| THER | AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES |
| RELA | TING TO THE PROPER AND COMPLETE PERFORMACE OR MY DUTIES |
| POST | I AM FAMILIAR WITH AND ACCEPT THE CHILGATIONS OF MY |
| | Addition and interest and in the second |
| | The state of the s |
| | SIGNATURE . / MUALIFICATION . / MARINE |
| | DATE 1-31-03 |
| | DATE 1-31-03 |