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SEGRETARY OF STATE
TAILAHASSEF ELOBOR.

### TRANSMITTAL LETTER

Department of State Division of Corporations P.O.Box 6327 Tallahassee, FL 32314

SUBJECT:	F	ARTY MAX,INC.			
	(PR	OPOSED CORPORATE NAM	E <u>-MUST INCLUDE SU</u>	FF(X)	
Enclosed are	an original and o	ne (1) copy of the articles of i	ncorporation and check t	for:	
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL	\$87.50 Filing Fee, Certified Copy & Certificate of Statu	
FROM	GAST	ON BENZAQUEN Name (Printed	or typed)		
	1831 VICTORIA POINTE CIRCLE  Address				
	WESTON, FL 33327 City, State&Zip				
	(3	05) 362-2400 Daytime Telepho	one number		

NOTE: Please provided the original and one copy of the articles

#### ARTICLES OF INCORPORATION

In complance with chapter 607 and/or chapter 621, F.S.(Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

PARTY MAX, INC.

# 03 AUG -7 AHII: 55 SECRETARY OF STATE TALLAHASSEE FLORIDA

#### ARTICLE\_II \_ PRINCIPAL OFFICE

The principal place of business/mailing address is:

410 WEST 49 TH.STREET (SUITE. 101-104) HIALEAH, FL 33012

#### ARTICLE III PURPOSE

The purpose for wich the corporation is organized is:

RETAIL&WHOLESALE OF PARTY GOODS AND SUPPLIES

#### ARTICLE IV SHARES

The number of shares of stock is:

100 shares

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

PRESIDENT: GASTON BENZAQUEN, 1831 VICTORIA POINTE CIRCLE, WESTON, FL 33327

VICE-PRESIDENT: BRIGITTE BENZAQUEN, 10155 COLLINS AVE APT.906 BAL HARBOUR FL 33154

TREASURER: GASTON BENZAQUEN, 1831 VICTORIA POINTE CIRCLE, WESTON, FL 33327 SECRETARY: ABRAHAM BENZAQUEN, 1831 VICTORIA POINTE CIRCLE, WESTON, FL 33327

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is:

JANET MACFARLANE 410 WEST 49TH STREET (STE.101-104) HIALEAH, FL 33012

#### <u>ARTICLE \_VII \_ \_ INCORPORATOR</u>

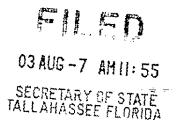
The name and address of the incorporator is:

GASTON BENZAQUEN 1831 VICTORIA POINTE CIRCLE WESTON, FL 33327

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

J.S. Margare.	04-Aug-03
Signature/Registered Agent	Date
Charles of	04-Aug-03
Signature/Incorporator	Date

#### CERTIFICATE OF DESIGNATION OF



#### REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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:	PARTY MAX, INC.	
2. The name and address of the reg	istered agent and office is:	
JANET MACFAI	RLANE	
	(Name)	
410 WEST 49th STREET		
(Ρ.	O. Box not acceptable)	
HIALEAH, FL 33012	(0)(-(0), -(-17), )	
	(City/State/Zip)	
Having been named as registered above stated corporation at the plant the appointment as registered age to comply with the provisions of a mance of my duties, and I am fair as registered agent.	lace designated in this certificate ant and agree to act in this cap all statutes relating to the prope	e, I hereby accept acity. I further agree r and complete perfor-
J.S. Macga		8(म)०७