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Division of Corporations

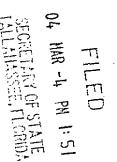
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From:

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.

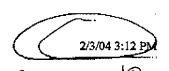
DIRECT CARDS INC.

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ARTICLES OF INCORPORATION OF

DIRECT CARDS INC.

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:

DIRECTS CARDS INC.

The principal place of business of this corporation shall be: 4909 sw 135 ct MIAMI, FE 33175

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.

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 is: 100 shares & \$ 1.00 par value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(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):

ALEJANDRO DIAZ 4909 SW 135 ST. MIAMI, FL 33175

O4 MAR -4 PM 1:51
SECRETARY OF STATE
TALLAMASTES, IT ORIDA

ARTICLE VI INCORPORATOR(S)

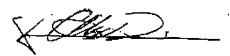
The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

ALEJANDRO DIAZ 4909 SW 135 CT MIAMI, FL 33175

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this,

03 day of FEBRUARY 2004

Signature(s) of Incorporator(s)



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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.

T. The hame of the curpo	ganon.	
DIRECT CARDS INC.		· · · · · · · · · · · · · · · · · · ·
2. The name and address office is:	of the registered ac	jent and
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ALEJANDRO DIAZ 4909 SW		
(P.O. BOX	(NOT ACCEPTABLE)	第二
MIAMI, FL 33175	·	H-S F m_
(CI	TY/STATE/ZIP)	D STA
		SH .5
	SIGNATURE &	<i>May</i> 2;
	TITLE-	
	DATE 2/3/04	
HAVING BEEN NAMED TO AC	CERT SERVICE OF PR	CESS FOR THE

HAVING BEEN NAMED 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	VIIII)	
DATE	2/03/04	
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