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(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

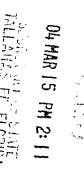
Office Use Only



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03/15/04--01063--009 **78.75

EFFECTIVE DATE



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TRANSMITTAL LETTER

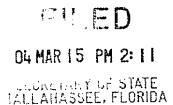
Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: SAFE START BABY PROOFING, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and (1) one copy of the Articles of Incorporation and a check for \$78.75

FROM:	GELBER AND COMPANY	
	Name	
	11450 INTERCHANGE CIRCLE NORTH	
	Address MIRAMAR, FL 33025	
	City, State & Zip	
	954-435-4222	
	Daytime Telephone number	Candace



ARTICLES OF INCORPORATION

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:

SAFE START BABY PROOFING, INC.

EFFECTIVE DATE

ARTICLE II - PRINCIPAL OFFICE

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

3333 NW 25TH TERRACE BOCA RATON, FL 33434

ARTICLEE III PURPOSE

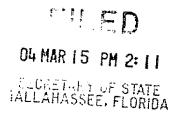
The purpose for which the corporation is organized is: CONSULTANT IN BABY PROOFING HOMES

The number of shares of stock is: 100

ARTICLE V REGISTERED AGENT President Owner

The name and Florida street address of the registered agent is:

CATHERINE E HAYEK 3333 NW 25TH TERRACE BOCA RATON, FL 33434



ARTICLE VI INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

CATHERINE E HAYEK 3333 NW 25TH TERRACE BOCA RATON, FL 33434

ARTICLE VII EFFECTIVE DATE

The effective date of this corporation shall be: APRIL 1, 2004

Signature/Incorporator

2.5.04

Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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/REGISTERED AGENT Date

Wesident OWNEY