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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

APPROVED  
AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.  
FMR MANAGEMENT CORP.

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF INCORPORATION  
OF  
FMR MANAGEMENT CORP.

I, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be: FMR MANAGEMENT CORP., and its existence shall be perpetual.

2. The general nature of the business to be transacted shall be to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of one hundred (100) shares, without nominal par value.

4. The amount of capital with which this corporation shall begin business in not less than FIVE HUNDRED DOLLARS.

5. The principal office of this corporation shall be at 1380 PARKSIDE CIRCLE SOUTH, BOCA RATON, FLORIDA 33486.

6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

<u>NAME</u>	<u>OFFICE</u>	<u>POST OFFICE ADDRESS</u>
1. ROBERT SLOANE	President	1380 PARKSIDE CIRCLE SOUTH BOCA RATON, FL 33486
2. MICHAEL CANTOR	Vice-President	19355 TURNBERRY WAY, #25B AVENTURA, FL 33180
3. FRED BERTZ	Secretary and Treasurer	7932 SPRINGVALE DR. LAKEWORTH, FL 33467

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (\$500.00), are as follows:

This Document prepared by:  
Daniel M. Kail, P.A.  
3165 West 4th Avenue  
Mialeah, Florida 33012  
Telephone No. (305) 893-5500  
Florida Bar No. 181663

<u>NAME AND ADDRESS</u>	<u>NO. OF SHARES</u>	<u>CONSIDERATION</u>
1. ROBERT SLOANE	33 1/3	\$166.67
2. MICHAEL CANTOR	33 1/3	\$166.67
3. FRED PERITZ	33 1/3	\$166.67

8. ROBERT SLOANE, is hereby designated as the Registered Agent for the corporation at 1380 PARKSIDE CIRCLE SOUTH, BOCA RATON, FLORIDA 33486.

IN WITNESS WHEREOF, the undersigned hereby subscribes to this Certificate of Incorporation at Hialeah, Florida this \_\_\_\_\_ day of \_\_\_\_\_, 2005, for the uses and purposes aforesaid.

*[Handwritten Signature]*  
 ROBERT SLOANE  
*[Handwritten Signature]*  
 MICHAEL CANTOR  
*[Handwritten Signature]*  
 FRED PERITZ

STATE OF FLORIDA  
 COUNTY OF DADE

BEFORE ME, the undersigned authority, personally appeared

1. ROBERT SLOANE
2. MICHAEL CANTOR
3. FRED PERITZ

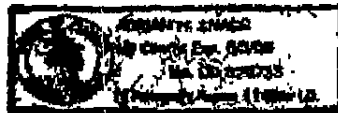
Subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Hialeah, Dade County, Florida this the 15<sup>TH</sup> day of MARCH, 2005.

*[Handwritten Signature]*  
 Notary Public, State of FL.

My Commission Expires:

This Document prepared by:  
 Daniel M. Keil, P.A.  
 3165 West 4th Avenue  
 Hialeah, Florida 33012  
 Telephone No. (305) 883-6600  
 Florida Bar No. 181663




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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN  
FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with section 28.091, Florida Statutes, the  
following is submitted:

FMR MANAGEMENT CORP.


desiring to organize or qualify under the laws of the State of  
Florida, with its principal place of business at the City of  
~~Lake Worth~~ state of Florida, has named ROBERT SLOANE located at  
1380 PARKSIDE CIRCLE SOUTH, BOCA RATON, FLORIDA 33486 as its Agent  
to accept service of process within Florida.

  
ROBERT SLOANE, CORPORATE OFFICER

TITLE President

DATE 3/15/05

I 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.

  
REGISTERED AGENT  
3/15/05  
DATE

This Document prepared by:  
Daniel M. Keil, P.A.  
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Bialeah, Florida 33012  
Telephone No. (305) 883-6600  
Florida Bar No. 181663