

07/05/95 11:59 AM

FAX T CORPORATION AGENTS

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CHARGES PLEASE ENTER YOUR PASSWORD. TO ABANDON THIS PROCESS, ENTER 'N'.
7/5/95 FLORIDA DIVISION OF CORPORATIONS 9:42 AM
7/05/95 FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM 11:59 AM

((H95000007431)) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: FAB-T CORP. AGENTS, INC.
DEPARTMENT OF STATE 6405 NW 53RD ST
STATE OF FLORIDA SUITE C-100
409 EAST GAINES STREET MIAMI FL 33166- FL 33418-0000
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ
PHONE: (305) 592-4000
FAX: (305) 592-9991
FAX: (904) 922-4000

((H95000007431)) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: MI FOGON, CORP.
FAX AUDIT NUMBER: H95000007431 CURRENT STATUS: REQUESTED
DATE REQUESTED: 07/05/1995 TIME REQUESTED: 11:59:32
CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 1
NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX
ESTIMATED CHARGE: \$78.75 ACCOUNT NUMBER: 071001002335

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** ENTER 'M' FOR MENU. **
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Translation: My Stove, Corp.

FILED
95 JUL -5 PM 12: 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS

95 JUL -5 PM 1:45

RECEIVED

H95000007431

ARTICLES OF INCORPORATION

OF

MI FOGON, CORP.
(My Stove Corp.)

FILED
95 JUL -5 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MI FOGON, CORP.

The principal place of business of this corporation shall be: 437 Espanola Way
Miami Beach, FL 33139

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 par value that this corporation is authorized to have outstanding at any one time is: 300 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):

Ana Isabel Cardenas	1101 Marseilles Dr. # 106
	Miami Beach, FL 33141
Rafael Ortega	1101 Marseilles Dr. # 106
	Miami Beach, FL 33141
Rogelio Peraza	1101 Marseilles Dr. # 106
	Miami Beach, FL 33141

Prepared by: Rogelio Peraza
1101 Marseilles Dr. # 10
Miami Beach, FL 33141
(305) 867-8048

105000007431

ARTICLE VI INCORPORATOR(S)

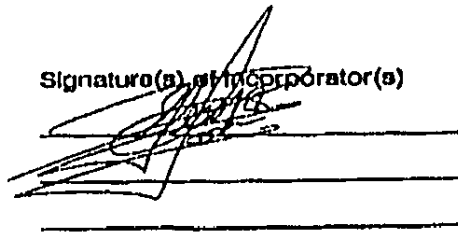
The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Rogelio Porozo

1101 Marcellus Dr. # 106
Miami Beach, FL 33141

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 5th day of July, 1995

Signature(s) of Incorporator(s)



STATE OF FLORIDA

COUNTY OF _____ Date _____

THE FOREGOING instrument was acknowledged and sworn to before me this 5th day of July, 1995 by Rogelio Porozo (FL driver's license P620-725-64-331-1) (Name of Incorporator) of Mi Fogon Corp. (Name of Corporation)

Notary Public


My Commission Expires: _____

OFFICIAL NOTARY SEAL
LIDIA FERNANDEZ
NOTARY PUBLIC STATE OF FLORIDA
My Commission Expires: 02/02/98
COMMISSION No. CC346066
BONDED THRU GENERAL INS. LNO.

(SEAL)

ARTICLES OF INCORPORATION FILING FEE: _____

H95000007431

**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.

1. The name of the corporation is: M1 Fogon, Corp.

2. The name and address of the registered agent and office is:

Regulio Parazo
(P.O. BOX NOT ACCEPTABLE)

1101 Marceillos Dr. # 106 Miami Beach, Fl 33141
(CITY/STATE/ZIP)

SIGNATURE [Signature]
(Corporate officer)
TITLE Director
DATE 7/05/95

FILED
95 JUL -5 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 [Signature]
DATE 7/05/95

REGISTERED AGENT FILING FEE: