

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, Tel. (904) 222-7881
 Mailing Address: Post Office Box 10109, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____
 PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service _____ Two Day Service _____

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

RE: East Atlantic

Capital Express, Inc.

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input type="checkbox"/> Art. of Inc. Filing		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership Filing		
<input type="checkbox"/> Foreign Corp. Filing		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. Filing		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name Filing		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service	****122.50	****122.50
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 Filing		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> Filing No.'s. _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone () _____		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () _____ pgs.		

SUBTOTALS

FEE.....	\$ 19
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY APL _____

WALK-IN Will Pick Up 7-19-230

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

ARTICLES OF INCORPORATION
OF
EAST ATLANTIC ENTERPRISES, INC.

The undersigned incorporator, for the purpose of forming a corporation under the Florida General Corporation Act, hereby submit the following articles of incorporation.

ARTICLE I

The name of the corporation shall be: EAST ATLANTIC ENTERPRISES INC.
The principal place of business of this corporation shall be: 1901 Brinson Road,
F-8, Lutz, Fl.. 33549

ARTICLE II

This corporation may engage in the business of owning, operating, buying, selling,
and holding businesses related to recreation, entertainment, and construction
(where properly licensed).

ARTICLE III

The aggregate number of shares of stock that this corporation is authorized to have
outstanding is one hundred at a par value of \$1.00 per share.

ARTICLE IV

This corporation is to exist perpetually.

ARTICLE V

The names of the initial officers of this corporation are:
PRESIDENT, VICE PRESIDENT, TREASURER and SECRETARY
Brett P. Krumenacker
1901 Brinson Road, F-8, Lutz, Fl.. 33549
These officers will hold their respective offices for the first year of the
corporation's existence or until their successors are elected.

ARTICLE VI

The name and address of the incorporator to this articles of incorporation is:
Brett P. Krumenacker
1901 Brinson Road, F-8, Lutz, FL. 33549

IN WITNESS WHEREOF, the undersigned incorporator has executed these
articles of incorporation this 15 day of July 1995.

Signature of incorporator

Brett P. Krumenacker

FL. DR. CIRC. 655-015-26-322-3

State of Florida

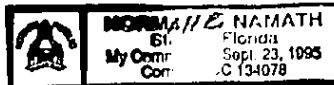
County of Pasco

THE FOREGOING instrument was acknowledged and sworn to before me
this 15 day of July, 1995 by Brett P. Krumenacker, D.O.B.
of EAST ATLANTIC ENTERPRISES, INC.

NOTARY PUBLIC

Norman E. Namath

My commission expires _____



CERTIFICATE DESIGNATING
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: EAST ATLANTIC ENTERPRISES, INC.
2. The name and address of the registered agent and office is:
Brett P. Krumenacker
1901 Brinson Rd. #F-8
Lutz, Florida 33549

Signature *Brett P. Krumenacker*
Corporate Officer
Title *President*
Date *July 15, 1995*

Having been named to accept services 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 obligations of section 607.325 Florida Statutes.

Signature *Brett P. Krumenacker*
Registered Agent
Date *July 15, 1995*

FILED
95 JUL 19 PM 1:45