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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY
CONTACT: RAY STORMONT
PHONE: (305)541-3694

ACCT#: 072450003255

FAX #: (305)541-3770

NAME: KARINE PROFESSIONAL, INC.

AUDIT NUMBER.....H96000013258

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

CERT. COPIES.....1

PAGES..... 5

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME and PURPOSE

NAME

The name of the corporation shall be: KARIBE PROFESSIONAL, INC.

PURPOSE

The Corporation is organized for the transaction of any and all lawful business for which a corporation may be incorporated under the Laws of the State of Florida, including but not limited to the business of services, investments, real estate, or any other business incident or connected to such business, including retail and wholesale sales.

ARTICLE II PRINCIPAL OFFICE

10801 SW 109 CT. SUITE # D-109
MIAMI, FL, 33176

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

10801 SW 109 CT., SUITE D 109
MIAMI, FL, 33176

ARTICLE III CAPITAL STOCK

The Capital Stock authorized, the Par Value thereof and the characteristics of such Stock shall be as follows:

Number of Shares Authorized	Par Value/Share	CLASS OF STOCK
100	\$1.00	COMMON

Instrument prepared by:

Ana Rodriguez

Professional Consultant

2320 SW 57 AVE #203

MIAMI, FL., 33155

(305) 267-1926

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ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

SAMUEL SILVA
10801 SW 109 CT., SUITE D-109
MIAMI, FL 33176

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s)

SAMUEL SILVA
10801 SW 109 CDT., SUITE D 109
MIAMI, FL, 33176

The undersigned have executed these Articles of Incorporation this 19 day
of SEPTEMBER, 1996.


(signature/title)

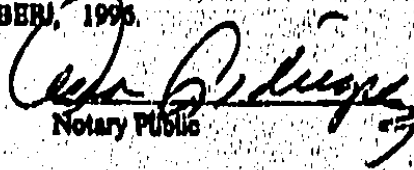
STATE OF FLORIDA)
SS
COUNTY OF DADE)

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared SAMUEL SILVA, and known to be the person who executed the foregoing Articles of Incorporation, and who acknowledged before me that she executed these Articles of Incorporation.

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IN WITNESS WHEREOF, I have hereunto affixed my hand and seal in the State and County
aforesaid, this day of 17 SEPTEMBER, 1996.


Notary Public

ANA J. RODRIGUEZ
Notary Public, State of Florida
My Comm. Expires May 29, 1998
No. 00074848
Bonds Through Notary Service

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, 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 shall be: **KARIBE PROFESSIONAL INC.**

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

SAMUEL SILVA
10801 SW 109 CT., SUITE D 109
MIAMI, FL 33176

SIGNATURE


(Corporate officer)
PRESIDENT

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 provision 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


SAMUEL SILVA

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