

P96000094788
TRANSMITTAL LETTER

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

SUBJECT: IMAGINATION WORKSHOP, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and a
check for: \$122.50

600002012886--8
-11/22/96--01099--017
****122.50 ****122.50

FROM: IMAGINATION WORKSHOP, INC.
Name (printed or typed)

Robert Newman
Name (printed or typed)

1501 E. Hallendale Beach Blvd. Suite 118
Address

Hallendale, FL 33009
City, State & Zip

(954)-486-3131
Daytime Telephone number

(954)-486-2955
Fax number

NOTE: Please provide the original and one copy of the articles.

ag 11/20/96

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

IMAGINATION WORKSHOP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1501 E. Hallendale Beach Blvd. Suite 118 Hallendale, FL 33009

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **100,000** shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

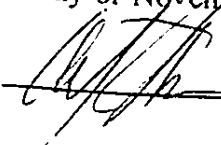
The name and address of the initial registered agent is:

Robert Newman
1501 E. Hallendale Beach Blvd. Suite 118 Hallendale, FL 33009

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: **Robert Newman** **1501 E. Hallendale Beach Blvd. Suite 118 Hallendale, FL 33009**

The undersigned incorporator has executed these Articles of Incorporation this 6th day of November, 1996.



Signature

Articles of Incorporation
Filing Fee - \$35

FILED
STATE
CLERK
TALLAHASSEE, FLORIDA
JAN 11 1983

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT,
IN THE STATE OF FLORIDA.

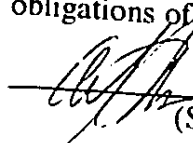
1. The name of the corporation is:
IMAGINATION WORKSHOP, INC.
2. The name and address of the registered agent and office is:

Robert Newman
(name)

1501 E. Hallendale Beach Blvd. Suite 118
(address)

Hallendale, FL 33002
(City, State, Zip)

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 am familiar with and accept the
obligations of my position as registered agent.



(Signature)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314