0096605 NOV-26-1996

TO:

DIVISION OF CORPORATIONS

PROM: EMPIRE CORPORATE KIT COMPANY

CONTACT: RAY STORMONT

PHONE: (305)541-3694

NAME: IREME, INC.

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

CERT. OF STATUS...O

CERT. COPIES.....1

PAGES..... 5

DEL.METHOD... FΛX

EST.CHARGE.. \$122.50

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE PAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

** INVALID SELECTION...PLEASE RE-ENTER **

ENTER SELECTION AND <CR>: 11/26/96

FLORIDA DIVISION OF CORPORATION

PAX #: (904)922-4001

ACCIH: 072450003255

PAX #: (305)541-3770

8

5:35 PM PUBLIC ACCESS SYSTEM

BLECTRONIC FILIMING COVER SHEET

(((

Help F1 Option Menu F2

NUM

Connect: 00:05:0!

ij

.496-1.53762 -nc 11-27-96

ARTICLES OF INCORPORATION



07.

H96000016766

TREME, INC.

ARTICLE I

The name of the Corporation shall be: IREME, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 10420? ".W. 29th Ct., Minmi, FL 33147.

ARTICLE III NATURE OF CORPORATE BUSINESS

The Corporation may engage in or transact any and all activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV TERMS OF EXISTENCE

The Corporation shall have perpetual existence.

ARTICLE V CAPITAL STOCK

The Corporation is authorized to issue and have outstanding at any one time an aggregate number of One Thousand (1000) shares of one class of common stock having a par value of One and 00/100 (\$1.00) Dollar per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

PREPARED BY: HARIA R. FERNANDEZ GOMEZ, P.A.
255 ALMAMBRA CIRCLE, SUITE 610
CORAL GABLES, FL 33134
TEL: (305) 441-8080 FAX: (305) 448-4990

PLORIDA BAR NO: 998494

H960000167**66**

H96000016766

ARTICLE VI INITIAL REGISTERED AGENT

The Corporation's initial registered agent and registered office in the State of Florida shall be:

INITIAL REGISTERED AGENT: ARMANDO DIAZ

INTITAL REGISTERED OFFICE: 10420 N.W. 29th Ct., Miami, FL 33147

ARTICLE VII BOARD OF DIRECTORS

The number of Directors may be altered from time to time by By-Laws adopted by the Stockholders. However, the Corporation shall have no less than one (1) Director at any time.

ARTICLE VIII INCORPORATORS

The names and addresses of each Incorporator executing these Articles of Incorporation are

85 follows: ARMANDO DIAZ and YUDHIT GONZALEZ.

The UNDERSIGNED Incorporator, for the purpose of forming a Corporation to do business with the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts herein stated are true.

ARMANDO DIAZ, incorporator

YUDHIT GONZALEZ, incorporator

STATE OF FLORIDA)	
)	SS:
COUNTY OF DADE)	

H96000016766

BEFORE ME, personally appeared ARMANDO DIAZ and YUDHII GONZALEZ to me well known and known to me to be the persons described as Incorporator in the foregoing Articles of Incorporation and he acknowledged to and before me that he executed said Articles of Incorporation for the purposes therein expressed.

WITNESS my hand and official seal this 2/ day of November, 1996.

Nothing Tub at Large

[PLEASE PRINT] MARIA R. GREAMWINES GROMES.

My Commission Expires:



H96000016766

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 617.0501, Florida Statutes, the undersigned conversion, 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:		93	
	IREME, INC.	173.1	137	77
2.	The name and address of the registered agent and office is:		27	
	ARMANDO DIAZ at 10420 N.W. 29TH CT., MIAMI, FL 33147.	(m*	35 47 11	Ö
	SIGNATURE ARMANDO DIAZ TITLE PROSIDE NOC DATE 11-31-1956	<u>z</u>	_	

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 I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE ARMANDO DIAZ

DATE //- 2/- 96

H96000016766