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TRANSMITTAL LETTER

FILED
97 JAN -2 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1/2/1997.

300002044113--2
-01/03/97--01033--008
*****70.00 *****70.00

SUBJECT: C.T.S. FRAMING, INC.

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: CLAUDE DESROCHES
Name (printed or typed)
P. O. BOX 6
Address
DANIA FL 33004
City, State & Zip
407 739-9190
Daytime Telephone number

JAN 8 1997

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

The name of the corporation shall be:

C. T. S. FRAMING, INC.

ARTICLE II PRINCIPAL OFFICE

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

3811 SANDPIPER DR # 7
Boynton Beach Fl 33436-2427

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE THOUSAND COMMON SHARES \$ 1.00 P.V.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLAUDE DESROCHES
3811 SANDPIPER DR #7
BOYNTON BEACH FL 33436-2427

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ARTICLE V INCORPORATOR(S)

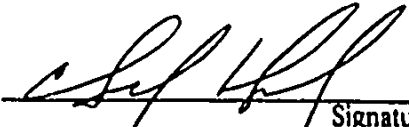
See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CLAUDE DESROCHES
3811 SANDPIPER DR # 7
BOYNTON BEACH FL33436-2427

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

2ND day of JANUARY 1997, 19 .



Signature
CLAUDE DESROCHES

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
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 is: C.T.S. FRAMING, INC.

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

CLAUDE DESROCHES

3811 SANDPIPER DR # 7

(NAME)

3811 SANDPIPER DR # 7

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOYNTON BEACH FL 33436-2427

(CITY/STATE/ZIP)

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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)

1/2/97

(DATE)

CLAUDE DESROCHES
LOUIS P. GAUTHIER
NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXP. JANUARY 27, 1999
COMM. NO. CC 427373
Bonded Thru General Ins. Co.


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