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FLORIDA DIVISION OF CORPORATIONS

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FROM: BUSINESS WORLD TRANSACTIONS, INC.
104512000707

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CONTACT: GEORGE G PICARDIE
PHONE: (305) 867-8448
(305) 861-4414

FAX #:

NAME: TWINS HEALTH CARE SERVICES, CORP.
AUDIT NUMBER.....H97000002049
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 5, 1997

BUSINESS WORLD TRANSACTIONS, INC.

SUBJECT: TWINS HEALTH CARE SERVICES, INC.
REF: W97000002866

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: **TWINS HEALTH CARE SERVICES, CORP.**

ARTICLE II PRINCIPAL OFFICE

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

5401 Collins Ave.
#9N
Miami Beach, Fl. 33140

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **One Thousand (1000) shares at One Dollar (1.00) per value.**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Claudia Riefkohl
8912 S.W. 142 Ave.
#404
Miami, Fl. 33186

Prepared by:

Claudia Riefkohl
8912 S.W. 142 Ave.
#404
Miami, Fl. 33186
(305)868-1888

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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):

Claudie Riefkohl
8912 S.W. 142 Ave.
#404
Miami, Fl. 33186

Director & President.

Rafael Riefkohl
8950 S.W. 142 Ave.
#915
Miami, Fl. 33186

Director, Vice- President & Secretary.

Rafael J. Riefkohl
8912 S.W. 142 Ave.
#404
Miami, Fl. 33186

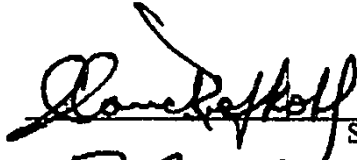
Director & Treasurer.

Jorge Marquez
8888 S.W. 131 Ct.
#201
Miami, Fl. 33186

Salvatore Laratta
8912 S.W. 142 Ave.
#404
Miami, Fl. 33186

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

3 day of February, 19 97



Signature



Signature

Signature

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

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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.

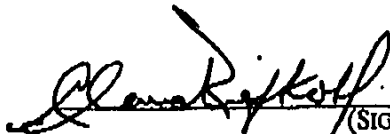
1. The name of the corporation is: TWINS HEALTH CARE SERVICES, CORP.

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

Claudia Riefkohl
(NAME)
8912 S.W. 142 Ave. #404
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)
Miami, Fl. 33186
(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

2-3-97
(DATE)

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

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