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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839

ACCT#: 071001002335

FAX #: (305)716-0346

NAME: OCEAMAR INVESTMENT, INC.

AUDIT NUMBER.....H9700004492

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

CERT. OF STATUS..1

PAGES..... 4

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

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nc 3/18/97

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ARTICLES OF INCORPORATION OF
OCEAMAR INVESTMENT, INC.

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TALLAHASSEE, FLORIDA

ARTICLE I. NAME

The name of this corporation is:

OCEAMAR INVESTMENT, INC.

ARTICLE II. DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE III. PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV. CAPITAL STOCK

This corporation is authorized to issue FIVE HUNDRED (500) shares of COMMON STOCK, with a par value of TEN (\$10.00) dollars each.

ARTICLE V. AMOUNT OF CAPITAL

The amount of capital with which this corporation will begin business is not less than FIVE THOUSAND (\$5,000.00) DOLLARS.

ARTICLE VI. PREEMPTIVE RIGHTS

Every shareholders upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

Prepared by: Marta Santos
6945 Veronese St.
Coral Gables, FL 33146
(305) 262-9502

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ARTICLE VII. INITIAL REGISTERED OFFICE, AGENT AND PRINCIPAL OFFICE

The street address of the initial registered office of this corporation is:
6945 VERONESE ST., CORAL GABLES, FL 33146

The name of the initial registered agent of this corporation is:
MARTA SANTOS

The corporation principal office shall be:
6075 SUNSET DRIVE, SUITE 301
MIAMI, FL 33173

ARTICLE VIII. INITIAL BOARD OF DIRECTORS

This corporation shall have (ONE) director(s), initially. The number of director(s) may be either increased or diminished from time to time by the bylaws but shall never be less than ONE (1).

The name(s) and address (es) of the initial Board of Director(s) of this corporation is (are):

MARTA SANTOS
6945 VERONESE ST
CORAL GABLES, FL 33146

ARTICLE IX. INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.


ARTICLE X. INCORPORATORS

The name and address of the person(s) signing these Articles of Incorporation is (are):

MARTA SANTOS
6945 VERONESE ST
CORAL GABLES, FL 33146

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IN WITNESS THEREOF, we, being all of the original subscribers and incorporators of this Corporation for the purpose of forming a Corporation, do make and file these Articles of Incorporation with the Secretary of State of the State of Florida, and accordingly set our hands and seal this 11TH day of MARCH, 1997.


MARTA SANTOS

STATE OF FLORIDA
COUNTY OF DADE

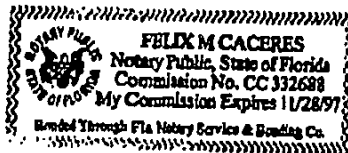
I HEREBY CERTIFY THAT on this day, before me a Notary Public duly authorized in the above mentioned State and County to take acknowledgments, personally appeared

-----MARTA SANTOS-----

to me well known and known to be the persons described in and who executed these foregoing Articles of Incorporation, and they acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hands and official seal in the City of Miami, County of Dade and State of Florida, this 11TH day of MARCH, 1997.


NOTARY PUBLIC
STATE OF FLORIDA AT LARGE



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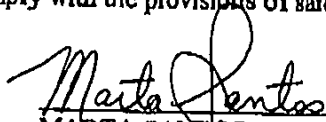
**CERTIFICATE DESIGNATING DOMICILE FOR THE SERVICE OF PROCESS
WITHIN THE STATE OF FLORIDA
NAMING AGENT WHO PROCESS MAY BE SERVED**

In pursuance of Chapter 48,091, Florida Statutes, the following is submitted, in compliance with said Act:

First-That OCEAMAR INVESTMENT, INC. _____
qualified to do business under the laws of the State of Florida with its principal office at
6075 SUNSET DRIVE, SUITE 301 _____
the City of MIAMI _____, County of DADE _____, State of Florida has appointed
MARTA SANTOS, 6945 VERONESE ST _____
City of CORAL GABLES, County of DADE _____, State of Florida, as its
agent to accept service of process within this State.

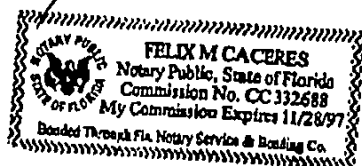
ACKNOWLEDGMENT

Having been named to accept service of process for the above stated Corporation,
at place designated in this Certificate, I hereby accept to act in this capacity, and agree to
comply with the provisions of said Act, relative to keeping open said office.


MARTA SANTOS

Sworn to and subscribed before me,
this 11TH day of MARCH, A.D. 1997


NOTARY PUBLIC
STATE OF FLORIDA AT LARGE



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