FILED

97 SEP 15 NM 10: 18

SECRETARY OF STATE TALL ANASSEE, FLORIDA

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

SUBJECT:	Reach for the Stars Productions Tuc.			
	(Proposed comorate name - must include suffix)			

400002293194--9 -09/15/97--01113--014 ****122.50 ****122.50

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

\$131.25 Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

6097 Balboa Circle 302

Boca Raton F1 33433 City, State & Zip

561-347-9752 Daytime Telephone number

SEP , 6 1007

P.Hall

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

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The undersigned incorporator, for the purpose of forming a corporation under the Florida

SECRETARY OF STATE

Business Corporation Act, hereby adopts the following Articles of Incorporation.

TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Reach For the Stars Productions, Inx.

ARTICLE II PRINCIPAL OFFICE

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

6097 Balboa Circle #302 Boca Raton, Fl

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Sandra DSMOKER 6097 Balbon Circle 302 Boca Raton F1 33433

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Sandra D SmolKer 6097 Balboa Circle 302 Boca Raton Fl 33433

Signature/Incorporator

12/97 Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date