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NEW FILINGS	
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<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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DIVISION OF CORPORATIONS
97 OCT -3 PM 1:04

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W97-20817

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

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DIVISION OF CORPORATIONS
97 OCT -3 PM 1:04

September 10, 1997

INSURANCE CORNER
3680 NW 11TH STREET
MIAMI, FL 33125

SUBJECT: INSURANCE CORNER, INC.
Ref. Number: W97000020817

We have received your document for INSURANCE CORNER, INC.. However, the document has not been filed and is being returned for the following:

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 797A00045021

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DIVISION OF CORPORATIONS
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September 29th, 1997

Florida Department of State
Division of Corporations
New Filing Section

Attn.: Claretha Golden
Document Specialist


Ref: Insurance Corner, Inc.
3680 NW 11th, Street
Miami, FL 33125
Number: W9700020817

As per our phone conversation, I am enclosing the additional information you requested to complete the processing of my application to register the Articles of Incorporation for Insurance Corner, Inc.

Regarding the above referred application, I am aware of the existence of other similar entities already registered as Insurance Corner II, Inc. and Insurance Corner III, Inc. These already registered corporation will not represent any conflicting interest since are owned by persons having equal interest in this new corporation.

Should any liability arise regarding this matter, I will assume the responsibility related to this case.

Sincerely Yours,


Caridad Gonzalez
Incorporator

Pd: Please note The delayed date of
Incorporation as of "01/01/98"

EFFECTIVE DATE

01/01/98

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**ARTICLES OF INCORPORATION
OF
INSURANCE CORNER, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Corporation Act, hereby adopt the following Articles of Incorporation

ARTICLE I - NAME

The name of the Corporation shall be: Insurance Corner, Inc.

The Principal place of business of this corporation shall be: 3680 NW 11th, St. Miami, FL 33125

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other State, Country, Territory or Nation.

ARTICLE III - CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: Five Hundreds (500) SHARES of one Dollar (\$1.00) par value common stock.

ARTICLE IV - TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V - OFFICERS AND DIRECTORS

The names and street address of the initial officers and directors who shall hold office the first year of the corporation's existence or until their successors are elected are:

Caridad Gonzalez	[Pres.]	3621 NW 4 th Street	Miami FL 33125
Armando Silva	[VP]	3680 NW 11 th , ST.	Miami, FL 33125

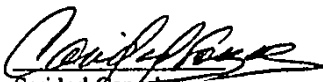
ARTICLE VI - INCORPORATOR

The name and street address of the incorporator to this Article of Incorporation is:
Caridad Gonzalez 3621 NW 4th, St. Miami, FL 33125

ARTICLE VII - INCORPORATION DATE

The effective date of this Articles of Incorporation shall be: January 1st, 1998

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation:
ON October 1st, 1997

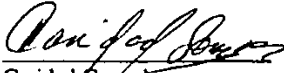

Caridad Gonzalez

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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
AGENT\REGISTERED OFFICE, IN THE STATE OF FLORIDA.

1. The name of the Corporation is : Insurance Corner, Inc.
2. The name and address of the registered agent and office is: 3621 NW 4th, ST., Miami, FL 33125


Caridad Gonzalez

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 obligation of my position as registered agent.


Caridad Gonzalez
October 1st, 1997