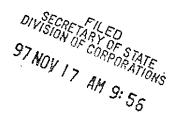
Department of State Division of Corporations

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P. O. Box 6327 Tallahassee, FL 32314	t	90	0002348 -11/17/97 ****131.25
SUBJECT:	OEFINE FITNESS, INC.	ate name - must include suff	ix)
Enclosed is an original	and one(1) copy of the articles	of incorporation and a c	heck for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Mr. Achilles Delac Name (Pr	≘O rinted or typed)	
	19477 NE 10th Avenue, Suite 308 Address		
	North Miami Beach	, Florida 33179 State & Zip	
	(305) 655-3484 Daytime T	elephone number	<u> </u>

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



ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DEFINE FITNESS, INC.

ARTICLE II PRINCIPAL OFFICE

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

19477 NE 10th Avenue, Suite 308 North Miami Beach, Florida 33179

ARTICLE III SHARES

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

One-Thousand (1,000) Shares of Stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mr. Achilles Deleao 19477 NE 10th Avenue, Suite 308 North Miami Beach, Florida 33179

ARTICLE V INCORPORATOR

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

Mr. Achilles Deleao 19477 NE 10th Avenue, Suite 308 North Miami Beach, Florida 33179

Signature incorporator

01/13/97 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

11/13/97 Para