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5/13/98

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS TO:

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: BEEPERMANIA AND CELLULARS, INC.

AUDIT NUMBER..... H98000009037 DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1

PAGES..... 4

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NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU, **

CERTIFICATE OF INCORPORATION

<u>of</u>

BEEPERMANIA AND CELLULARS, INC.

WE, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

- 1. The name of the corporation shall be BEEPERMANIA AND CELLULARS, INC., and its existence shall be perpetual.
- 2. The general nature of the business to be transacted shall be to sell, rent, and repair beepers and cellular phones and to have all other powers provided by the laws of the State of Florida.
- 3. The capital stock of the corporation shall consist of fifty (50) shares, without nominal par value.
- 4. The amount of capital with which this corporation shall begin business in not less than FIVE HUNDRED DOLLARS.
- 5. The principal office of this corporation shall be 16300 N.E. 19th Avenue, Suite 221, N. Miami Beach, Florida 33162.
- 6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

NAME

OFFICER.

POST OFFICE ADDRESS

SOME LEO

1. Adalberto Herrera

President

16300 N.E. 19 Ave., #221 N. Miami Beach, FL 33162

Prepared By: Daniel M. Keil 3165 W. 4 Ave. Hialeah, Fl. 33012 (305) 883-6600 FL.BAR# 181663

H98000009037

- 1. Jacqueline Herrera Vice-President 16300 N.E. 19 Ave., #221 N. Miami Beach, FL 33162
- 7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (\$500.00), are as follows:

NAME AND ADDRESS	NO. OF SHARES	CONSIDERATION
1. Adalberto Herrera	25	\$250.00
2. Jacqueline Herrera	25	\$250.00

8. DANIEL M. KEIL, ESQ., is hereby designated as the Registered Agent for the corporation and 3165 West 4th Avenue, Hialeah, Florida 33012.

IN WITNESS WHEREOF, the undersigned hereby subscribe to this Certificate of Incorporation at Hialeah, Florida this _____ day of ______, 1998, for the uses and purposes aforesaid.

ADALBERTO HERRERA

ACQUELINE HERRES

STATE OF FLORIDA)

COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared

SS.

1. ADALBERTO HERRERA

2. JACQUELINE HERRERA

Describer(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

Notary Public, State of FL.

My Commission Expires:

OFFICIAL PARY SEAL CABADA ATE OF FLORIDA COMMISSIC CC449514

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CERTIFICATE OF DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MY BE SERVED.

In compliance with Section 28.091, Florida Statutes, the following is submitted:

BEEPERMANIA AND CELLULARS, INC.

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the City of Miami, State of Florida, has named DANIEL M. KEIL, Esq. located at 3165 West 4th Avenue, Hialeah, Florida 33012, as its Agent to accept service of process within Florida.

CORPORATE OFFICER

TITLE MOSIO

DATE 5-11-98

FILED

98 MAY II, AH IO: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

RESIDENT AGENT

DATE 5-11-9