

PA8000069440

OFFICE USE ONLY (Filing #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

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-08/10/98--01047--011

*****78.75 *****78.75

OFFICE USE ONLY

ARTICLES OF INCORPORATION

OF

MY GIFT PLACE, INC.

ARTICLE I - NAME

The name of this corporation is

MY GIFT PLACE, 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 one hundred (100)

FILED
98 AUG 10 PM 1:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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 one hundred (100)
shares of no par value common stock, which shall be designated
"Common Stock".

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, 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.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial ^{principal} registered office of this corporation is 1609 RED ROAD, CORAL GABLES, FL. 33155

and the name of the initial registered agent of this corporation is OFELIA ALVAREZ BASCUAS

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have two director(s) initially.
The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE.
The name and address(es) of the initial director(s) of this corporation is (are):

<u>OFELIA ALVAREZ BASCUAS</u>	<u>1609 RED ROAD</u> <u>CORAL GABLES, FL, 33155</u>
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<u>SyLVIA CUESTA</u>	<u>1020 ANDALUCIA</u> <u>CORAL GABLES, FL. 33134</u>
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ARTICLE VIII - INDEMNIFICATION

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

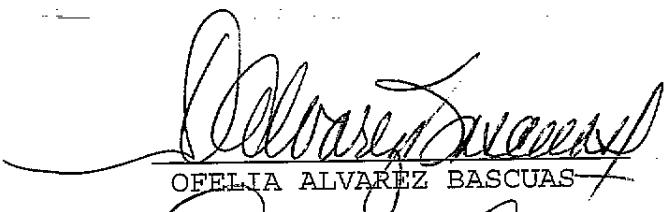
ARTICLE IX - INCORPORATOR

The name(s) and address(es) of the incorporator(s) of these articles is (are):

OFELIA ALVAREZ BASCUAS 1609 RED ROAD
CORAL GABLES, FL. 33155

SYLVIA CUESTA 1020 ANDALUCIA
CORAL GABLES, FL. 33134

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have)
executed these articles of incorporation this _____ day of
JULY, 1998.


OFELIA ALVAREZ BASCUAS


SYLVIA CUESTA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
THE STATE OF FLORIDA, NAMING AGENT UPON WHOM
SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with section 607.034 of the Florida Statutes,
the following is submitted: MY GIFT PLACE, INC.
desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business in the City of
Miami, County of Dade, State of Florida, has named _____
OFELIA ALVAREZ BASCUAS located at _____
1609 RED ROAD City of Coral Gables, County of Dade,
State of Florida as its agent to accept service of process within
the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the above
mentioned corporation, at the place designated in this
Certificate, _____
I hereby agree to act in this capacity, and further agree to
comply with the provisions of all Statutes relative to the proper
and complete performance of my duties.

Dated this _____ day of _____, 1998.



Resident and Registered Agent

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SECRETARY OF STATE
TALLAHASSEE FLORIDA