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To: Division of Corporations
Fax Number : (850) 922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

NORA
~~MORA~~ ORIGINALS INC.

Certificate of Status	0
Certified Copy	1
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me 10/9/98

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE OF INCORPORATION
OF

MOBA ORIGINALS INC.

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

ARTICLE I NAME

The name of the corporation shall be: MOBA ORIGINALS INC.

The principal place of business of this corporation shall be:
730 CORAL WAY SUITE 201
CORAL GABLES, FLORIDA 33134

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 State, 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: $100 \times \$ 10.00 = \$ 1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

prepared by: Basic Accounting Service
692 W. 29 st. # 9
Hialeah, Fl 33012 305-887-4185

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

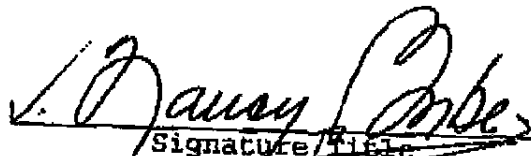
NANCY BARE 730 Coral Way Suite 201 Coral Gables, Fl. 33134	DIRECTOR
ANA M. CRESPO 730 Coral Way Suite 201 Coral Gables, Fl. 33134	DIRECTOR

ARTICLE VI INCORPORATOR(S)

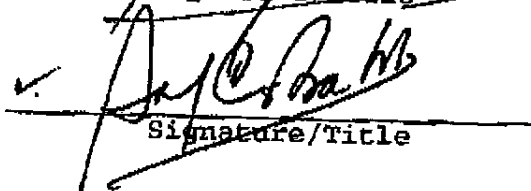
The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

NANCY BARE 730 Coral Way Suite 201 Coral Gables, Fl. 33134	PRESIDENT . SECRETARY & TREASURER 80 shares
ANA M. CRESPO 730 Coral Way Suite 201 Coral Gables, Fl. 33134	VICE-PRESIDENT 20 shares

The undersigned has(have) executed these Article of Incorporation this 9th day of October, 1998.



Signature/Title



Signature/Title

Signature/Title

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**CERTIFICATE OF DESIGNATION**
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: _____
MOBA ORIGINALS INC.
2. The name and address of the registered agent and office is _____
ANA M. CRESPO
(Name)
730 Coral Way Suite 201
(P. O. BOX NOT ACCEPTABLE)
Coral Gables, Florida 33134
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED 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 MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE 10-9-98