RUS 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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OFFICE USE ONLY

C	DRPORATION NAME(S) & DOCUMENT NUI	MBER(S) (if known):	- 		
1.	ELQUITY CONSULTAI	NTS/NC.		- -	
2.	(Congeration Name)	(Document #)	<u>-</u>		
3.	(Corporation Name)	(Document #)	IALL.	9	
4.	(Corporation Name)	(Document #)	VETAT WHAS		
	(Corporation Name) Walk in Pick up time 9.00	(Document #) Certified Copy	17 10 10 10	2	
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	NEW FILINGS
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	NonProfit
	Limited Liability
	Domestication
	Other

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	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

		REGISTRATION QUALIFICATION		
		Foreign /		
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		Reinstatement	V	7
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Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 19, 1999

LAZARUS

MIAMI, FL

SUBJECT: EQUITY CONSULTANTS, INC.

Ref. Number: W99000001354

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

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 199A00002462

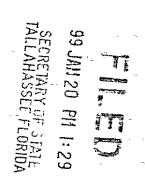
ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

DCW Equity consultants, Inc.



ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III SHARES

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

30 Shales @ \$ 10.00 par value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carmen Hoyos 1230 SW 126 Place Miami, Fr 33184

ARTICLE V INCORPORATOR(S)

	ANTICE	V INCOME ON A TOMO		
Incorporation i	is(are): checo 710 Intiz 149	es) of the incorporator(s) NE 29 ST # 14 HE 9 CT SO SW 126 PL	Miami, Mialeah, Fa	33010
	ARTI	CLE VI DIRECTOR(S)		
The name(s) a Incorporation Wilson Polise Carmen I	is(are): Acheco 7/0 Actiz 149	(es) of the director(s) to to $AE 29 ST #14$ $E 9 CT$ $E 9 CT$ $E 9 CT$	Hialeah, F	33010
The undersig	ned incorporator(s this <i>!5</i>	has(have) executed the day of <u>fonvoly</u>	se Articles of , 19 <i>99</i> .	
		WP	· · · · · · · · · · · · · · · · · · ·	
		Signature		
		Denise Optiz	<u> </u>	
		Signature //		
		Camen Hay	<u>ws</u>	
		Signature		

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: <u>EQUITY</u> <u>Consultants</u> <u>Inc.</u>
2.	The name and address of the registered agent and office is:
	Carmen Hoyos.
	(P.O. BOX NOT ACCEPT ABLE)
	(P.O. BOX NOT ACCEPT ABLE)
	Migmi, Fr. 33184 (CITY/STATE/ZIP)
	•
PPO DES REC AGR THE FAM	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF DICESS FOR THE ABOVE STATED CORPORATION AT THE PLACE IGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS DISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER SEE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM HILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS DISTERED AGENT.
	SIGNATURE Comm Stayo SEE F
	DATE 1-15-99 F 29