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Florida Department of State

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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
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FLORIDA PROFIT CORPORATION OR P.A.

CUBAN AMERICAN THRIFT INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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B. McKnight APR 1 2 1999

ARTICLE OF INCORPORATION

OF
CUBAN AMERICAN THRIFT 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: CUBAN AMERICAN THRIFT INC.

The principal place of business of this corporation shall be:
1355 E. 10 Ave.
Hialeah, Fl.33010

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 x $ 10.00 = $ 1,000.00

ARTICLE IV TERM OF EXISTENCE
This corporation is to exist perpetually.

Prepared By: Basic Accounting Service
692 West 29 Street #9
Hialeah, Florida 33012
Phone#(305)-887-4185

99 APR 12 PM 2:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA
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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):

ELEIDA M. PEREZ   DIRECTOR
 6830 Indian Creek Dr.# 4-A
 Miami Beach,Fl. 33141

ROLANDO ESTRADA   DIRECTOR
 5451 W. 7 CT.
 Miami, Fl.33012

ARTICLE VI INCORPORATOR(S)

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

ELEIDA M. PEREZ   PRESIDENT & TREASURER
                                50 shares
  6830 Indian Creek Dr. # 4-A
  Miami Beach,Fl.33141

ROLANDO ESTRADA   VICE-PRESIDENT & SECRETARY
  5451 W. 7 CT.   50 SHARES
  Miami,Fl. 33012

The undersigned has(have) executed these Article of Incorpora
tion this __12 th.__ day of __April__ ,19 99 .

_____
        Signature/Title

_____
        Signature/Title

_____
        Signature/Title

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:_____

    CUBAN   AMERICAN   THRIFT   INC.

2. The name and address of the registered agent and office

  is___ELEIDA   M.   PEREZ_____
                            (Name)

    6830 Indian Creek Dr. # 4-A
            (P. O. BOX NOT ACCEPTABLE)

    Miami Beach, Florida   33141
            (CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DEST AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE_____

DATE_____4/10/99_____