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LOCAL REPRESENTATIVE TALLA	HASSEE	OFFICE USE ONLY	
1. W. C. ASTROL (Corporation Name) 2.	DOCUMENT NUMBER OF CO.	BER(S) (if known): PORTIC (Document#)	ON
(Corporation Name)		(Document #)	
(Corporation Name)		(Document #)	78 99 AS 99
.4. (Corporation Name)		(Document #)	9 JU
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Profit NonProfit Limited Liability Domestication Other OTHER FILNGS Annual Report Fictitious Name Name Reservation	Change of Registed Dissolution/Withdown Merger REGISTRATION QUALIFICATION Foreign Limited Partnershi Reinstatement Trademark	A., Officer/Director ered Agent rawal	99 JUL 23 AMIL: 29 THE CELL PLANTS THE CONTRACT STATES THE CONTRAC
	Other	Fram	iner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE! NAME

The name of the corporation shall be:

W.C.ASTROLOGY CORPORATION

99 JUL 23 PH 1:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3700 S.W. 139 AVE MIAMI,FL 33175

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EDUARDO ARANDA 3700 S.W. 139 AVE. MIAMI,FL 33175

ARTICLE V INCORPORATOR(S)

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

EDUARDO ARANDA 3700 S.W. 139 AVE MIAMI,FL 33175

ARTICLE VI DIRECTOR(S)

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

EDUARDO ARANDA 3700 S.W. 139 AVE MIAMI,FL, 33175

Articles of Incorporation Filing Fee - \$35

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.

The name of the corporation is:	W. C. ASTROLOGY
The name and address of the regi	istered agent and office is:
(Na	AME)
3700 S. W. 139 AVE	t 124 to 177
(P.O. BOX <u>NO</u>	T ACCEPTABLE)
MIAMI, FL 33175	
(CITY/S	TATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT 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 REGISTERED AGENT.

SIGNATURE 2

07/22/99 DATE

REGISTERED AGENT FILING FEE: \$35.00