TRANSMITTAL LETTER

P99000098870

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

-11/08/99--01018--016 ****166.25 *****87.50 **SUBJECT:** Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$87.50 \$78.75 **\$78.75** \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee Certified Copy & Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED 5128 Gainesville Dr Address

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME The name of the corporation shall be:	
steakcity.com, Inc.	99 NOV SECHE TALLAH
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corpor	ration shall be:
1910 E. Fletcher Ave.	F A U
Tampa F1 33612 -	STATE 3
ARTICLE III SHARES	5···· —
The number of shares of stock that this corporation is authorized t	o have outstanding of any
ARTICLE IV INITIAL REGISTERED AGENT AND The name and Florida street address of the initial registered agent.	D STREET ADDRESS
Paniel O. Lazaro	are:
5/28 Gainesville Dr.	
Town to 32 cor.	
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of Inc	The second secon
of the incorporator to these Articles of Inc	
Daniel O. Lazaro (President)	JUAN CARLOSLAZARO (VICE-
5/28 Gainesville Dr.	SESY MANUSSAS Rd. PRESIDENT
Tampa #1-336/7	TAMPA, Fl. 33635
0-02-	
Signature/Incorporator	

(An additional article must be added if an effective date is requested.)

Date

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/Registered Agent Date