

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

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

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305)867-8448
Fax Number : (305)264-0232

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99 DEC 21 PM 2:29

FLORIDA PROFIT CORPORATION OR P.A.**MOCHI, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

B. McKnight DEC 21 1999

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ARTICLES OF INCORPORATION

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

ARTICLE I

NAME

The name of the corporation shall be: MOCHI, INC.

ARTICLE II

PRINCIPAL OFFICE

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

17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ~~8~~ COMMON SHARES. ~~28~~

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHIMOL .! CHOCRON
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

Prepared By: CHIMOL CHOCRON
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160
305-9353219

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**ARTICLE V
INCORPORATOR(S)**

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

MOISES CHOCRON
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

DIRECTOR & PRESIDENT

PERLA EDDERAI
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

DIRECTOR & VICE-PRESIDENT

COTA COHEN
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

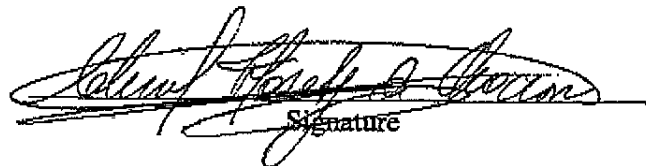
DIRECTOR & SECRETARY

CHEMOL CHOCRON
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

DIRECTOR & TREASURER

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20 day of 12, 19 99


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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.

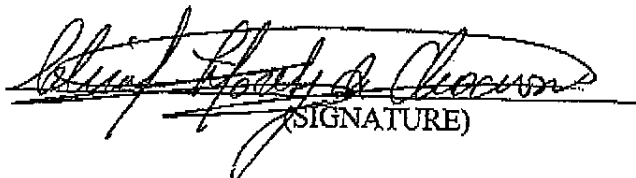
1. The name of the corporation is: MOCHI, INC.

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

CHIMOL CHOCRON
17555 COLLINS AVE #170
MIAMI BEACH, FL.33160

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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)

12-20-99
(DATE)

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