715795

(Requestor's Name)
4
(Address)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Octahed Copies

Special Instructions to Filing Officer:
i
<u></u>

Office Use Only



000022413470

09/04/03--01086--001 **105.00

03 SEP -4 PHIZ: 58

10 Common of the common of the

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: 12590 CORONADO TOWERS, FNC. (Name of corporation)
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tom HENRY (Name Of person)
12590 CORONADO TOWERS, FNC (Name of firm/company)
12590 NE 16 Ave #305 (Address)
World MIAMI, FL. (City/state and zip code)
For further information concerning this matter, please call:
(Name of person) at () (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State
of Florida. 1. The name of the corporation: 12590 CORONADO TOWERS Condominion
2. The principal office address: 12590 NE 16 AVE NORTH MIAMÍ, FL 33161
3. The mailing address (if different):
4. Date of incorporation/qualification: 12.31 - 61 Document number: 715795
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: MYRA SHAPIRO 12590 NE 16 Ave #307 NORTH MIAMI, FL 33161
6. The name and street address of the new registered agent (if changed) and /or registered office of the changed): Tom HENRY
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. (Signalure of an officer, chairman or vice chairman of the board)
(Signature of Registered Agent) (Printed or typed name and title) (Printed or typed name and title)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

__

* * * FILING FEE: \$35.00 * * *