G24428

(Requestor's N	ame)
(Address)	
(Address)	
(City/State/Zip/l	Phone #)
PICK-UP WAI	T MAIL
(Business Entit	y Name)
(Document Nur	mber)
Certified Copies Certif	icates of Status
Special Instructions to Filing Office	r:
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R.A. Change

C. Coutlistic NOV 0 6 2007:

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: UNITED BATHROOM SYSTEMS, INC. (Name of Corporation)
DOCUMENT NUMBER: 624428
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:
(Name of Contact Person)
WITH BATHROOM SYSTEMS, INC (Firm/Company)
4121 SW 47Th AVE., STE 1335
City/State and Zip Code)
For further information concerning this matter, please call:
Chaples 14. Tuever at (454) \$83-526\(\text{(Area Code & Daytime Telephone Number)} \) 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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $\ \cdot$

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	
1. The name of the corporation: UNITED BATHROOM SYSTEMS INC	_
2. The principal office address: 4121 SW 47Th AVE., STE 1335	_
DAVIE, FL 33314	- ·
3. The mailing address (if different):	-
4. Date of incorporation/qualification: 02/17/1983 Document number: 42 44 28	_ _
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Charles H. TURNEL COUNTED BATHROOM SYSTEMS, INC	
210 UNITED BATHROOM SYSTEMS, INC 	
FT LANDERDALE, FL 33314 TASE 9	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	_TT
Chaples H. TURNER THE	
4121 SW 47721 AVE. STE 1335 (P.O. Box NOT acceptable)	Vicinal
(P.O. Box NOT acceptable) AAVIE, FL 33314	
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.	
authorized by the board, or the corporation has been notified in writing of the change.	
(Signature of an officer or director) (Printed or typed name and title)	
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 relative to the proper and considered performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Charles H Turner (Signature of Registered Agent) 11/02/07 (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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