L14898

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

APPROYEU AND FILED

C. Coullière JUN 1 9 2007

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISCUS CORPORATION (Name of Corporation)
DOCUMENT NUMBER: 114898
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) OISCUS (ORDORATION) (Firm/Company)
455NE 2457 APT. 3 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
TOSE MORCATE at (305) 573-5009 (Name of Contact Person) (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

in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: DISCUS (ORDORATION)
2. The principal office address: 455 NF 2457 APT, 3 MAMI FLORIDA 33/37 3. The mailing address (if different): P.O. BOX 440338 MIAMI, FLORIDA 33/44 4. Date of incorporation/qualification: 29-12-89 Document number: 4/898 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: LOIS QUINTANA
3. The mailing address (if different): P.O. BOX 440338 MAMI, FLORIDA 33/44 4. Date of incorporation/qualification: 99-12-89 Document number: 4/898 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: LOIS QUINTANA LOS S. W. 2774 AVE MAMI, FLORIDA 33/35 PERSONAL SECRETARIA
4. Date of incorporation/qualification: <u>09-12-89</u> Document number: <u>L/4898</u> 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: LUIS QUINTANA LOSS, W. 27TH AVE MIAMI, FLORIDA 33/35 ACCEPTANA 6. The name and street address of the new registered agent (if changed) and for registered office.
4. Date of incorporation/qualification: <u>09-12-89</u> Document number: <u>L/4898</u> 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: LUIS QUINTANA LOSS, W. 27TH AVE MIAMI, FLORIDA 33/35 ACCEPTANA 6. The name and street address of the new registered agent (if changed) and for registered office.
4. Date of incorporation/qualification: <u>19-13-89</u> Document number: <u>14898</u> 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Florida Department of State: LUIS QUINTANA 100 S. W. 27TH AVE MIAMI, FLORIDA 33135 ACC SERVICE STATE STATE 6. The name and street address of the new registered agent (if changed) and for registered office.
100 S.W. 27TH AVE MIAMI, FLORIDA 33/35 THE DESCRIPTION OF THE PRODUCTION OF THE PR
MIAMI, FLORIDA 33135 ASS 9 FIRST 9 F
MIAMI, FLORIDA 33135 ASS 9 FIRST 9 F
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
AVA L. LAROSA FIRE E
455NE 24 ST APT 3
(P.O. Box NOT acceptable)
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.
(Signature of an officer or director) PRESIDENT (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 complete 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.
(Signature of Registered April (Date)
If signing on behalf of an entity:
AVA L. LAROSA

* * * FILING FEE: \$35,00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)