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(Business Entity Name)

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R-A - Charge

G. Goulette APR 02 2008

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INDEBCA, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000005834

The enclosed ~~Articles of Correction and fee are submitted for filing~~

*Change of Req. Agent*

Please return all correspondence concerning this matter to the following:

Armando Payas, Esq.  
(Name of Contact Person)

Payas, Payas & Payas, LLP  
(Firm/Company)

1018 E. Robinson Street  
(Address)

Orlando, FL 32801  
(City/State and Zip Code)

For further information concerning this matter, please call:

Armando Payas, Esq. at ( 407 ) 425 7223  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certified Copy
- \$43.75 Filing Fee & Certificate of Status
- \$52.50 Filing Fee, Certificate of Status & Certified Copy

**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**

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INDEBCA, INC.
2. The principal office address: 830B East Vine Street  
Kissimmee, FL 34744
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 1/12/01 Document number: P01000005834

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Luis A. Cabrera  
1631 East Vine St. Suite 1  
Kissimmee, FL 34744

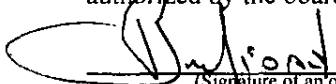
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Gerardina Recio  
600 N. Thacker Ave. Suite C 12  
(P.O. Box NOT acceptable)  
Kissimmee, FL 34741

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)

\_\_\_\_\_  
(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 Agent)

3-24-08  
\_\_\_\_\_  
(Date)

If signing on behalf of an entity:  
\_\_\_\_\_  
(Typed or Printed Name)

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