

P05000042467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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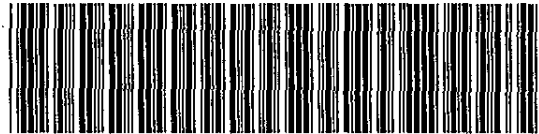
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 32399

R. H. Chong

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Robert Scott Fuller, P.A.
(Name of corporation)

DOCUMENT NUMBER: P05000042467

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:

Robert Scott Fuller
(Name of contact person)

Robert Scott Fuller, P.A.
(Firm/Company)

P.O. Box 1880
(Address)

Miami Beach, FL 33119
(City/state and zip code)

For further information concerning this matter, please call:

Robert Scott Fuller at (305) 403-0305
(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
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Robert Scott Fuller, P.A.
2. The principal office address: 1390 Ocean Drive #103
Miami Beach, FL 33139
3. The mailing address (if different): P.O. Box 1880
Miami Beach, FL 33119
4. Date of incorporation/qualification: 3/08/05 Document number: P05000042467
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Robert Scott Fuller
6915 Indian Creek Dr. #15
Miami Beach, FL 33141

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

Robert Scott Fuller

1390 Ocean Drive #103

(P.O. Box NOT acceptable)

Miami Beach, FL 33139

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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)

Robert Scott Fuller- 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.

N. D. [Signature]
(Signature of Registered Agent)

August 30, 2005
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAIL TO: MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314