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(Requestor's Name)

(Address)

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DIVISION OF CORPORATIONS
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EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRIAN BARAKAT, P.A.
Name of Corporation

DOCUMENT NUMBER: P05000165746

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:

BRIAN BARAKAT
Name of Contact Person

BRIAN BARAKAT, P.A.
Firm/Company

2701 PONCE DE LEON BLVD. SUITE 202
Address

CORAL GABLES, FL 33134
City/State and Zip Code

BRIAN@TRIALLOWMIAMI.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN BARAKAT at (305) 444-3114
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

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: BRIAN BARAKAT, P.A.

2. The principal office address: 2701 PONCE DE LEON BLVD, SUITE 202 CORAL GABLES, FLORIDA 33134

3. The mailing address (if different):

4. Date of incorporation/qualification: 12/22/2005 Document number: P05000165746

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

BARAKAT, BRIAN

169 EAST FLAGLER STREET, SUITE 1640

MIAMI, FL 33131

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

BARAKAT, BRIAN

2701 PONCE DE LEON BLVD, SUITE 202

P.O. Box NOT acceptable

CORAL GABLES, FL 33134

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 or authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director: Brian Barakat, Pres

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: 3/16/11 Date

If signing on behalf of an entity:

Typed or Printed Name

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

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

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