P95000050217

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
, , , , ,						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
	7					
Special Instructions to Filing Officer:						
	ı					

Office Use Only



900012588309

02/26/03--01041--012 **35.00 ****

O3 FEB 26 AN 9: 21
SECRETARY OF STATE

T BROWN MAR - 4 2003

R.A. Change

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Vertical Reality, Inc. (Name of corporation)
DOCUMENT NUMBER: P95000050217
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:
Kenneth Sharkey (Name of person)
Vertical Reality (Name of firm/company)
8552 SW 129th Terrace
(Address)
Miami, Florida 33156
(City/state and zip code)
For further information concerning this matter, please call:
Kenneth Sharkey at (786) 331-9009
(Name of person) at (786) 331-9009 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	o the provisions of sections 607.0502, 617.050 ent of change is submitted for a corporation org		
Florida	in order to change its registered of	·	•
of Florida.		0	
	ne of the corporation; Vertical Reality, Inc.		20 0
2. The princi	cipal office address: 8552 SW 129th Terrace, Mi	iami, Florida 33156	
		<u></u>	- 15 G
3. The maili	ling address (if different):		3
	<u> </u>		20%
4. Date of in	incorporation/qualification: 06/26/95	Document number:	P9500005021760
	ne and street address of the current registered age Department of State:	ent and registered office	on file with the
	Chase, Alan R.		
-	9400 S. Dadeland Boulevard, Suite 600		
	Miami, Florida 33156		
	ne and street address of the new registered ag	ent (if changed) and /or	r registered office (if
changed):): Kenneth Sharkey		
	8552 SW 129th Terrace		
	(P.O. Box or personal mailbox NO Miami, Florida 33156	T acceptable)	
The street acagent, as cha	address of its registered office and the street ad hanged will be identical.	ldress of the business of	lice of its registered
Such change authorized b	ge was authorized by resolution duly adopted by the board, or the corporation has been notif	y its board of directors lied in writing of the cha	or by an officer so ange.
		neth Sharkey, Director	
. •	officer, chairman or vice chairman of the board)	(Printed or typed name and t	
performance registered a	ceept the appointment as registered agent and agree to comply with the provisions of all statute ce of my duities, and I am familiar with and accagent. Or, if this document is being filed mere cess, I hereby confirm that the corporation has	cept the obligation of m Ny to reflect a change in	y position as i the registered
		21/9/03	
If aigning as t	(Signatur Cof Registered Agent)	(Date)	
ri 21Snuig ou o	behalf of an entity:		
	(Typed or Printed Name)	(Capacity)	

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