

Florida Department of State

Division of Corporations
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REGISTERED AGENT CHANGE

ASTURIAS INDUSTRIES, INC.

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\$35.00

FA Change

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11/15/2001

(850)487-6013

11/15/01 16:53 Fl Dept of State pl /1



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 15, 2001

ASTURIAS INDUSTRIES, INC. 10240 SOUTHWEST 84 AVENUE MIAMI, FL 33156

SUBJECT: ASTURIAS INDUSTRIES, INC.

REF: P98000057408

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Darlene Connell Corporate Specialist FAX Aud. #: H01000114814 Letter Number: 801A00061734 401000114814

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

Pursuant to	the provisions of sections gned corporation organized	: 607.0502, 617.0502 I imder the laws of the	. 607.1508, or 617.1508, Fl State of Florida	orida Statutes,
submits the	following statement in ord	ler to change its regis	ered office or registered age	ent, or both, in
the State of	Florida. cof the corporation:As	turias Industrie:	. Inc.	
i. incham	Of ale corbonarion			
2. The maili	•	on: 22154 Marte	lla Avenue, Boca Rato	7, FL
3. Date of i	ncorporation/qualification:	6/26/98	_ Document number: _ P98	000057408
	and address of the current		ffice:	N 3
		Utera, P.A.		2001 NOV 30
	343 Almeri			NON
	Coral Gabl	es, FL 33134		30
5. The name	and address of the new reg	distered agent (if chang P. O. Box Not Accepta	ed) and/or registered office (ble)	Z .
	Peter J. G	oldstein		5
•	22154 Mart	ella Avenue		57
		FL 33433	·	-
The street ac	idress of its registered offic anged, will be identical.	ce and the street addre	ss of the business office of i	ts regist ere d
Such/Change authorized b	was authorized by resolut by the board.	ion duly adopted by it	s board of directors or by an	officer so
12/34) (Signs)	or of an officer, chairman or vice	chairman of the board)	(Date)	<u> </u>
Pete	r J. Goldstein, Pres	ident	·	
Having been	(Printed or typed name as a named as registered agen I hereby accept the appoin	id title) t and to accept servic ntment as registered a	e of process for	nted capacity.
I fürther der performunce registeredig	named as registered agen I hereby accept the appoint we to comply with the prove of my duties, and I am fam gen	isions of our statutes r niliar with and accept	stant	nplete Tas
*P	XXXXX		(Dare)	
If eigning on b	(Signature of Registered Agent) chalf of an entity:			
an organization	(Typed or Frinted Name)		(Capacity)	
		THE TRUE THEFT. COC.		
	स के म	filing fee: \$35.0	,	
CR2E045(9/00)	DIVISION OF CORPORATIONS	P.O. Box 6327	Tallahassee, FL 32314	

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