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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. Les Schwartz, Inc

Name of Corporation

DOCUMENT NUMBER:

P98000094609

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:

Les Schwartz

Name of Contact Person

Les Schwartz, Inc

Firm/Company

278 Capri Ave

Address

Lauderdale by the Sea, FL 33308

City/State and Zip Code

optionpro@sprynet.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Les Schwartz

,_/954 \25

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: Les Schwartz, Inc.	
2. The principal office address: 278 Capri Ave Lauderdale by the Sea, FL 33308	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/09/1998 Document number: P98000094609	
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)	
SCHWARTZ, LESLIE B	
2700 Cypress Creek Rd., #107D East	
FORT LAUDERDALE, FL 33309 6. The name and street address of the new registered agent (if changed) and /or registered office	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	FILEO.
SCHWARTZ, LESLIE B	٠ ٠ ٠-
278 Capri Ave	17
P.O. Box NOT acceptable Lauderdale by the Sea, FL 33308	
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.	
Leslie B. Schwartz, 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.	
//////////////////////////////////////	
Signature of Registered Agent Date If signing on behalf of an entity:	

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