

P 99 0000 11954

Document Name
RETAIL DESIGN INT'L INC
103 PINE AVE
OLDSMAR FL 34677

700002973747--8
 -08/30/99--01103--008
 *****35.00 *****35.00

City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Examiner's Initials *DR re chg*

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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation is: Retail Design International, Inc
- 2. The mailing address of the corporation is: 7284 W. Palmetto Park Road
Boca Raton, FL 33433
- 3. Date of incorporation/qualification: 2-8-99 Document number: P99000011954
- 4. The name and address of the current registered agent and office:
Spiegel & Utters P.A.
343 Almeria Ave.
Coral Gables FL 33134
- 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
JERRY L. Chirichigno
103 Pine Ave.
OLDSMAR, FL 34677

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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.

Jerry Chirichigno (Signature of an officer, chairman or vice chairman of the board) 8-25-99 (Date)
JERRY Chirichigno Director (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Jerry Chirichigno (Signature of Registered Agent) 8-25-99 (Date)
 If signing on behalf of an entity:
JERRY Chirichigno (Typed or Printed Name) Director (Capacity)

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