## P9700093068

PRITCHARD & REISSMAN, P.A.

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December 14, 2000

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

400003504204--5 -12/18/00--01107--001 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Re:

Kimcor, Inc.

Statement of Change of Registered Agent

Our File No. 412004B

Dear Sir or Madam;

Enclosed herewith is the Statement of Change of Registered Office or Registered Agent for Kimcor, Inc. Also enclosed is our check for \$35.00 for the filing fee. Please time stamp the enclosed copy and return it in the self addressed, stamped envelope.

Thank you for your consideration in this matter.

Sincerely,

Marshall G. Reissman, Esq.

Enclosure

MGR/kg

RA Chg.

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

Pursuant to the provisions of sections 60	07.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, uder the laws of the State of Florida
submits the following statement in order	to change its registered office or registered agent, or both fifth
the State of Florida.  1. The name of the corporation:	Kimcor, Inc.
	P.O. Box 24131
2. The mailing address of the corporation	
3. Date of incorporation/qualification:	10-29-97 Document number: P9700093068
4. The name and address of the current re	gistered agent and office:
Kimbo	erly Llauget
4302	Gunn Hwy
Tamp	a, FL 33624
5. The name and address of the new regis	otered agent (if changed) and/or registered office (if changed): O. Box Not Acceptable)
3001 West C)	IPRESS STREET; Ste. 200
TAMPA, FL	33607
The street address of its registered offic agent, as changed, will be identical.	e and the street address of the business office of its registered
Such change was authorized by resoluti authorized by the board.	on duly adopted by its board of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the board) (Date)	
(Signature of an officer, chamball of vice of	L.D
Simple L-LLAUGE (Printed or typed name an	d title)
corporation, I nereby accept the appoin	t and to accept service of process for the above stated ntment as registered agent and agree to act in this capacity. isions of all statutes relative to the proper and complete niliar with and accept the obligation of my position as
May Malan	Perember 13, 2000
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)

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