N0000007973

	
(Requestor's Name)	
Shalom Network International P.O. Box 1178 Winter Park, FL 32790-1178	
PICK-UP WAIT MAIL	-
(Business Entity Name)*	
(Document Number)	
Certified Copies Certificates of Status	 ,
Special Instructions to Filing Officer:	

Office Use Only

200008996232

11/20/02--01045--010 **35.00

ALLAHASSEE FLORIDA

(3)/26/02 HKD

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6 undersigned corporation organized under the laws of the Stat		, the
submits the following statement in order to change its register	red office or registered agent, or both, in	n the
State of Florida.		
1. The name of the corporation: Shalam Network	International, Inc.	-
	<u>P:_S</u> _	
2. The mailing address of the corporation: PU-BOX. /		11
Winter Park, Marida 3279	70-1118	£ 2 3
3. Date of incorporation/qualification: 124/2000	_ Document number:	
4. The name and address of the current registered agent and re	egistered office:	
Taka asalu Da aharad A		•
Intrastate Registered A		
701 Brickell & AVE		
5. The name and address of the new registered agent (if chang	33/3/)•
Wendi Hunger	got) and to registered outloo (it entitiged)	.,.
	P /	
4041 Timuquana 1		
Jackson ville, Florida		·.
The street address of its registered office and the street addragent, as changed, will be identical.		
Such change was authorized by resolution duly adopted by authorized by the board.	its board of directors or by an officer	SO
Menditure 10 Dunger	11/5/02	.,
(Signature of an officer, chairman or vice chairman of the board)	(Date)	χ.
Wendilynne D. Hunger Treasure (Printed or typed redme and title)	er	-
Having been named as registered agent and to accept servi corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accepregistered agent.	ice of process for the above stated l agent and agree to act in this capacity relative to the proper and complete pt the obligation of my position as	y.
Mendelynul Alenger (Signature of Registered Agent)	11 5 102 (Date)	×
If signing on behalf of an entity:		
(Typed or Printed Name)	(Capacity)	
/-%	TWF	

CR2E045(8/99)

DIVISION OF CORPORATIONS P.O. E

P.O. Box 6327

TALLAHASSEE, FL 32314