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GOLDEN STRANE OCEAN VILLA RESORT, INC 17901 Collins Avenue, Sunny Isles Beach, FL 33160-2792		
	= 9	<u> </u>
(City/State/Zip/Phone #)		
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So is so is

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: GOIDEN STRAND OCEAN VILLA RESORT ASSOCI
Inc
2. The mailing address of the corporation: 17901 COILING AVENUE
SUNDI ISLES BEACH, PLORIDA 33160
3. Date of incorporation/qualification: 7/98/ Document number: 758 080
4. The name and address of the current registered agent and registered office:
RICHARD WASERSTEIN SE 2
913 DORMANDT DRIVE
MIAMI DEACH, FL 33141 For 30
5. The name and address of the new registered agent (if changed) and /or registered office (if changed): (P.O. Box NOT Acceptable)
GARY H. MARS
150 W. FLAGLER STREET 27th FLOOR
MIAMI, FL. 33130
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 arthorized by the board.
Joseph Fillman Pres 6-18-03
(Signature of an officer, chairman or vice chairman of the board) (Date)
(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.
7/2/03
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
GART MAIS AGENT LATTORVEY (Typed or Printed Name) (Capacity)

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