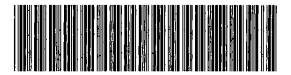
705989

(Requestor's Name)				
<u>·</u>				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
·				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400132557124

07/10/08--01011--011 **35.00

SECRETARY OF STATE

RA. Charge

G. Octablette JUL 1 4 2008

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: PERUVIAN TERRACE CONDOMIUM APARTMENTS, INC.					
(Name of Corporation)					
DOCUMENT NUMBER: 705989					
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:					
RICK HALLETT					
(Name of Con	tact Person) —				
RPH PROPERTY MANAGEMENT					
(Firm/Co	mpany)				
420 CO OLIVE AVE CTE 200					
120 SO. OLIVE AVE. STE. 209 (Addr	ess)				
(*****	,				
WEST PALM BEACH, FL. 33401-5531					
(City/State and Zip Code)					
For further information concerning this matter, please ca	all:				
DIOKLIALI					
(Name of Contact Person)	_ at (561) 379 7334 (Area Code & Daytime Telephone Number)				
((and course buy time to opposite traineer)				
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section	Street Address: Amendment Section				
Amendment Section Division of Corporations	Amendment Section Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				
,	Tallahassee, FL 32301				

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{\nabla}{2}$	Flor		2_
in orde	er to change its registered office or registered agent, or both, in the State of Flor	rida.		
1. The name of	the corporation: PERUVIAN TERRACE CONDOMINIUM APARTMENTS, INC.		· ·	
2. The principal	office address: 224 DATURA STREET #807			
	WEST PALM BEACH, FL. 33401			
3. The mailing a	address (if different): P O BOX 888			
•	PALM BEACH, FL. 33480			
4. Date of incor	poration/qualification: Document number: 105	98	9_	
	d street address of the current registered agent and registered office on file with a street address.	the		
	PARKEY, DRINA			•
	224 DATURA STREET #807			
	WEST PALM BEACH, FL. 33401	JAT 38	80	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	CRE TAR	JUL 1	
	RICK HALLETT	RY 0 SEE	0	
	120 SO. OLIVE AVE. STE. 209	رنے لئے	89	5
	(P.O. Box NOT acceptable) WEST PALM BEACH, FL. 33401	STATE LORID,	59	
	WEST FALM BEACH, FL. 33401	DE A		
The street address changed will	ess of its registered office and the street address of the business office of its rebe identical.	egiste re	d agent	,
Such change was	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	ficer so		
Leella.	auly Jonna-Daniele	#/	3/0	Sf 1
` •	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and comple d I am familiar with and accept the obligation of my position as registered and filed merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.	VH ete perfo gent. O confirm	ormand or, if this that the	e e Diracte
_ phone	PHULO 6/25/08			
	mature of Registered Agent) (Date)			
- 100	half of an entity:	~ <u>,</u>	-	•
(1	yped or Printed Menie)			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)