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March 25, 2002

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RETAINY OF STATE AHASSEE, FLORID

02 APR -1

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

Re:

EVR Group, Ltd./Ni-Bar Corp.

Our File No. 95037.02

Gentlemen:

500005171985--9 -03/27/02--01057--014 ******35.00 ******35.00

Enclosed are:

- 1. Limited Partnership Statement of Change of Registered Office or Registered Agent, or Both; and
- 2. My client's check for \$35.00 filing fee.

If you have any questions concerning this matter, please do not hesitate to contact me.

Sincerely yours,

KENNETH M. BLOOM

KMB/do Enclosures

cc:

Eva Rabin

Shirlee H. Segall

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LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. EVR Group, Ltd.	
Name of the limited partnership	
2. 02/07/1996 3. A9600000270 Date of filing/registration in Florida Document number assigned	
4. The name of the registered agent and the registered office address as shown on the records of the F Department of State: Daniels, Nicholas M. Esq.	-
5. The name and address of the new registered agent and/or office: Kenneth M. Bloom, Esq. Bloom & Minsker, P.L. 1110 Brickell Avenue-7th Floor Florida street address (P.O. Box not acceptable) Miami, FL 33131 City, State and Zip	HASSEE, FLORIDA
6. Such change(s) was/were authorized by the general partners.	
NI-BAR CORP. Alexander Dated: 3/20/01_ Signature of Grand Rather President	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to with the provisions of all statutes relative to the proper and complete performance of my duties, ar familiar with and accept the obligations of my position as registered agent. Or, if this document is bei merely to reflect a change in the registered office address, I hereby confirm that the limited partners been notified in writing of this change.	id Lam
Signature of Registered Agent Dated: 3/20/02	÷
Signature of Registered Agent	

Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00