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COVER LETTER

то:	Amendment Section Division of Corporations	
CUDIO	New Horizons Technologies International Inc	
SUBJE	SJECT: New Horizons Technologies International, Inc. (Name of corporation)	
DOCUI	CUMENT NUMBER: F00000003223	
The enc	enclosed Statement of Change of Registered Office/Agent and fee are submitted for fil	ing.
Please r	se return all correspondence concerning this matter to the following:	
	R. Lee Bennett, Esquire	
	(Name of contact person)	
	GrayRobinson, P. A.	
	(Firm/Company)	_
	301 East Pine Street, Suite 1400	_
	(Address)	
	Orlando, FL 32801	
	(City/state and zip code)	
For furt	further information concerning this matter, please call:	
Rlaal	ee Bennett, Esq. at (407) 244-5631	
	ee Bennett, Esq. at (407) 244-5631 (Name of contact person) (Area code & daytime telepho	one number)
Enclose	osed is a \$35.00 check made payable to the Department of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

CR2E045(6/04)

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Delaware to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	he corporation: New Horizons Technologies International, Inc.	<u></u>
2. The principal of	office address: 5575 S. Semoran Blvd., Suite 30	
	Orlando, FL 32822 US	
3. The mailing ac	ddress (if different): (Same)	<u></u> z
4. Date of incorp	poration/qualification: 06/06/2000Document number: F00000003223	_ -
	street address of the current registered agent and registered office on file with the tment of State:	
	Wakefield, S. Craig, Esq.	
6. The name and (if changed):	5575 S. Semoran Blvd., Ste. 30	
	Orlando, FL 32822	
	Street address of the new registered agent (if changed) and /or registered office GrayRobinson, P.A. c/o R. Lee Bennett, Esq.	FILED
	301 East Pine Street, Suite 1400	
	(P.O. Box NOT acceptable)	
	Orlando, FL 32801	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
CHE TO	Emest L. Wilding, President	
I hereby accept I further agree to of my duties, an document is bei corporation has	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 complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speep notified in writing of this change.	•
If signing on be	chalf of an entity:	
GrayRobinson,	P. A. Typed or Printed Name)	

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