## F02000002541

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ACCOUNT NO. : 072100000032

REFERENCE : 988428 7197927

AUTHORIZATION : Patricia Plain

COST LIMIT : \$ 35.00

ORDER DATE: March 28, 2003

ORDER TIME : 9:29 AM

ORDER NO. : 988428-020

CUSTOMER NO: 7197927

CUSTOMER: Ms. Caryn Kenin

Healthstar Communications, Inc

Suite 202

100 Woodbridge Center Drive

Woodbridge, NJ 07095

CHANGE OF AGENT

NAME: FANIZZI ASSOCIATES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

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

Pursuant to th	e provisions of sections 607.0502,	617.0502, 607.1508, or 617.1508, I	₹lorida S	tatute	S,
this statement	of change is submitted for a corporat	tion organized under the laws of the	State of		
Delaware	in order to change its regist	ered office or registered agent, or b	oth, in th	he Sta	te
of Florida.					
1. The name of	f the corporation: FANIZZI ASSOCIATE	ES, INC.			
2. The principa	al office address:			003	
_	ell Bay Dr., 27th Floor, Miami,		HA	AR C	-13
3. The mailing address (if different):			SEE		LED
			- F S 등	<u>25</u>	
4. Date of inco	rporation/qualification: 05/22/2002	Document number: F020	<u> </u>	$^{1}$ $^{\omega}$	
	nd street address of the current registe artment of State:	ered agent and registered office on fi	le with th	1e	
	C T Corporation System		-		
	1200 South Pine Island Road				
	Plantation, FL 33324		-		
6. The name a changed):	and street address of the new regist	ered agent (if changed) and /or reg	istered of	ffice (	(if
<b>.</b> ,	Corporation Service Company		_		
	1201 Hays Street (P.O. Box or personal m	nailbox <b>NOT</b> acceptable)	<del>-</del>		
	Tallahassee, FL 32301		_		
The street add agent, as chan	ress of its registered office and the s ged will be identical.	street address of the business office	of its reg	istere	d
Such change vauthorized by	vas authorized by resolution duly ad the board, or the corporation has be	lopted by its board of directors or by en notified in writing of the change.	an offic	er so	
(Signature of an office	er, chairman of the board)	Conn E. Kenin - Assist	tant S	crch	M
I further agree performance of registered age	of the appointment as registered age to comply with the provisions of all of my duties, and I am familiar with nt. Or, if this document is being file I hereby confirm that the corporati	ll statutes relative to the proper and and accept the obligation of my pos ed merely to reflect a change in the	complete sition as registere	ed .	
Elisto	adu	3/28/03		<del></del>	
If signing on beh	(Signature of Registered Agent) alf of an entity:	(Date)			
	A. Dawson	Asst. Vice President			
	(Typed or Printed Name)	(Capacity)			

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