F06000005195

(Re	questor's Name)	
		2
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
/D	-in-on-Fukii, klau	
(Bu	siness Entity Nan	ne)
	 	
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer	
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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations			
·			
SUBJECT: Candidates on Demand Group, Inc.			
(Name of Corporat	ion)		
DOCUMENT NUMBER: F06000005195			
The enclosed Statement of Change of Registered Office/Agent	t and fee are submitted for filing.		
Please return all correspondence concerning this matter to the	following:		
Michael Woloshin			
(Name of Contact Person)			
Candidates on Demand Group, Inc.			
(Firm/Company)			
433 Fifth Avenue, 6th floor			
(Address)			
New York NY 10016 (City/State and Zip Control of the City State and City Stat	Co.45		
• • • • • • • • • • • • • • • • • • • •	Code)		
For further information concerning this matter, please call:			
Heather Wood at (212) 213-0982 x 129		
(Name of Contact Person)	212 213-0982 x 129 (Area Code & Daytime Telephone Number)		
	60.		
Enclosed is a \$35.00 check made payable to the Department of	of State.		
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section		
Division of Corporations	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 change is submitted for	a corporation organized under the laws of the State of New York tered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Car	
	Fifth Avenue, 6th floor, New York NY 10016
3. The mailing address (if different):	
4. Date of incorporation/qualificatio	n: 6/28/2002
5. The name and street address of th Florida Department of State:	e current registered agent and registered office on file with the
Eric Fishkind	LCR A
618 US Highw	
North Palm Bea	ach FL 33408
6. The name and street address of th (if changed):	e new registered agent (if changed) and /or registered office
Eric Fishkind	
1201 US High	way One, #305
	(P.O. Box NOT acceptable)
North Palm Be	ach FL 33408
	office and the street address of the business office of its registered agent,
Such change was authorized by re authorized by the board or the cor	solution duly adopted by its board of directors or by an officer so poration has been notified in writing of the change.
muln	Michael C. Woloshin, President
(Signature of an officer or director	(Printed or typed name and title)
I hereby accept the appointment a I further agree to comply with the of my duties, and I am familiar wi document is being filed thereby to corporation has been potified in w	s registered agent and agree to act in this capacity, provisions of all statutes relative to the proper and complete performance the and accept the obligation of my position as registered agent. Or, if this reflect a change in the registered office address, I hereby confirm that the vitting of this change.
	(Date)
Signature of Registered Age	ent) (Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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