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COVER LETTER

Division of Corporations	
SUBJECT: ZOMAR PRODUCTIONS, INC.	
(Name of Co	rporation)
DOCUMENT NUMBER: F93000005772	
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:
BENJAMIN M GOTTLIEB, ESQ. (Name of Con	tact Person)
TIM A SHANE, P. A. (Firm/Con	mpany)
621 NW 53RD STREET, SUITE (Addre	
BOCA RATON, FL 33487	
(City/State and	d Zip Code)
For further information concerning this matter, please ca	ill:
Benjamin Gottlieb (Name of Contact Person)	at (561) 886-5580 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

TO: Amendment Section

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

. . .

statement of cha	•	607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of FLORIDA ed agent, or both, in the State of Florida.	
	the corporation: ZOMAR PRODUCTIONS	, ,	
	office address: 926 SW 35th COURT, BO		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification:	Document number: F9300005772	
	d street address of the current registered age thent of State:	<u> </u>	
	C J STEPHENS $\frac{6}{2}$		
	926 SW 35th COURT		
	BOYNTON BEACH, FL 33435	SSEE	
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office	
	WENDY A STEPHENS		
	926 SW 35th COURT		
	(P.O. Box NOT acceptable) BOYNTON BEACH, FL 33435		
The street address changed will		ddress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.			
Mond	ure of an officer of director)	WENDY A STEPHENS, PRESIDENT (Printed or typed name and title)	
I hereby decept I further agree of my duties, ar document is be	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the oblig	31	
Mong	1 G. Stat	JUNE 27, 2006	
	gnature of Registered Agent)	(Date)	
(Typed or Printed Name)		

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

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