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Walk in Pick up time		Certified Copy
Mail out Will wait		Certificate of Status
NEW FILINGS	AMENDMENTS	
 Profit Not for Profit Limited Liability Domestication Other 	 Amendment Resignation of R.A., Of Change of Registered A Dissolution/Withdrawa Merger 	agent
OTHER FILINGS	REGISTRATION/QUALI	FICATION
 Annual Report Fictitious Name 	 Foreign Limited Partnership Reinstatement Trademark Other 	RA Chy.

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of <u>New York</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Consultants 1. The name of the corporation is: 610bal

2. The mailing address of the corporation is: 350 Motor Par Kwau suite 210 Hauppauge

3. Date of incorporation/qualification: DI114196 Document number:

4. The name and address of the current registered agent and office:

Jonathan Lack	
800 W. Cyprus Creek	Rd Suite SOI
Fort Lauderdale	

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Steven Sherman 3200 N. Federal Highwa

Katon, FL 33431

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

WILLIAM G. ALVAI2O (Printed or typed name and title)

2/22/02

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

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If signing on behalf of an entity:

Sherman oteven

(Signature of Registered Agent)

(Typed or Printed Name)

FILING FEE: \$35.00

CR2E045(4/95)