6-65/32

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***COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	JACKAL INTERNATIO	ONAL. INC.	
Sobober	Name of Corpo		
DOCUMENT NUMBER:_	G65	5732	
The enclosed Statement of C	hange of Registered Office/Ag	ent and fee are submitt	ed for filing.
Please return all corresponde	ence concerning this matter to t	he following:	
	REJEAN LAP		
	Name of Contact	Person	
	LAPIERRE, BRAULT & A		
	Firm/Compa	iny	
	491 W OAKLAND PARK Address	BLVD., SUITE 306	
-	LAUDERHILL, FLOR City/State and Zi	RIDA 33319 p Code	
E-mail a	REJEAN@LAPIERREE ddress: (to be used for future	BRAULT.COM e annual report notifi	cation)
For further information conc	erning this matter, please call:		
	APIERRE at	(954) Area Code & Daytin	749-8802
Name of Cor	tact Person	Area Code & Daytin	ie Telephone Number
Enclosed is a \$35.00 check r	nade payable to the Departmen	t of State.	

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

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

	of the corporation: JACK			
2. The princ	ipal office address: 7491 \	N OAKLAND PA	ARK BLVD., SUITE 306	
LAUDE	RHILL, FLORIDA 333	319		
3. The maili	ng address (if different): SA	AME AS OFFICE	E ADDRESS	
4. Date of in	corporation/qualification:_	10/20/1983	Document number;	G65732
	and street address of the cu epartment of State: (If resign		at and registered office on file v	with the
	FERNANDO LAM	OTHE (MOVED	OUT OF COUNTRY)	
	721 SOUTH EAST	17TH STREET	•	
	FORT LAUDERDA	ALE. FL 33316		_
6. The name (if change			if changed) and /or registered o	2010 MAR Seeke Ta Tateaha
	7491 W OAKLAND	P.O. Box NOT acc		_ 22
	LAUDERHILL, FLO		apague.	
The street ad as changed v	ldress of its registered offic will be identical.	e and the street add	dress of the business office of	its registered agent, 29
	was authorized by resoluti y the board, or the corporat	ion duly adopted by tion has been notific	y its board of directors or by a ed in writing of the change.	in officer so
Such change authorized by				•
	nature of an officer or director	<u>-</u> _	CLAUDE THO Printed or typed name and	MAS
Step I hereby acce I further agre of my duties, document is		istered agent and a sions of all statutes d accept the obligat t a change in the re g of this change.	CLAUDE THO Printed or typed name and gree to act in this capacity, relative to the proper and co tion of my position as register egistered office address, I here	title
Step I hereby acce I further agre of my duties, locument is	ept the appointment as regi ee to comply with the provi and I am familiar with and being filed merely to reflec has been notified in writing	istered agent and a sions of all statutes d accept the obligat t a change in the re g of this change.	Printed or typed name and gree to act in this capacity, is relative to the proper and colion of my position as register egistered office address, I here MARCH 3RD 2	title implete performance sed agent. Or, if this eby confirm that the
I hereby acce I further agri of my duties, document is corporation	ept the appointment as regi ee to comply with the provi and I am familiar with and being filed merely to reflect has been notified in writing Signature of Registered Agent	istered agent and a isions of all statutes d accept the obligat t a change in the re g of this change.	Printed or typed name and gree to act in this capacity, relative to the proper and colion of my position as register egistered office address, I here	title implete performance sed agent. Or, if this eby confirm that the
I hereby accell further agreed for the following of the following the fo	ept the appointment as regi ee to comply with the provi and I am familiar with and being filed merely to reflec has been notified in writing	oj iris change.	Printed or typed name and gree to act in this capacity, is relative to the proper and colion of my position as register egistered office address, I here MARCH 3RD 2	title implete performance sed agent. Or, if this eby confirm that the

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