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Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.		
(Corporation Name)	(Document #)	•
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NEW FILINGS	AMENDMENTS	
Profit Not for Profit	Amendment Resignation of R.A., Officer/Director	
Limited Liability Domestication	Change of Registered Agent	I IO
Other	Dissolution/Withdrawal Merger	SEGRETAR IVISION OF 1
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report	Foreign	OF STAT
Fictitious Name	Limited Partnership Reinstatement	Tions 57
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## 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 FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: $ZYTEK$ , $INC$ .
2. The mailing address of the corporation: 901 N. LAKE DESTINY DR. STE, 126
MAITLAND, FL. 32751
3. Date of incorporation/qualification: 8/3/1984 Document number: H 15127
4. The name and address of the current registered agent and office:
JAMES, MICHAEL T. PRES.  1754 COCOPLUM CT  LONGWOOD, FL. 32779
1754 COCOPLUM CT
LONGWOOD FL. 32779 -
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
CHARTERS, ARLEN E. SEC.
CHARTERS, ARLEN E. SEC. 39
LONGWOOD, FL. 32779
The street address of its registered office and the street address of the business office of its registered
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board
10/1/2001 (Date)
(Signature of an officer, chairman of the board) (Date)
MICHAEL T. JAMES, PRES.
(Printed or typed name and title)  Having been named as registered agent and to accept service of process for the above stated
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. 10/1/2001
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
V-1F

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