

Feb-15-2005 04:16pm

From-DAVID WILLIAMS LAW FIRM PA

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0380

From:

Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I200100C0112
Phone : (302)575-0875
Fax Number : (302)575-0925

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

ACCENT ARTS OF FLORIDA, INC.

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P 2/16/05
RA/RO

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

Pursuant to the provisions of sections 607.0302, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Accent Arts of Florida, Inc.
2. The principal office address: 4154 South 3rd St.,
Jacksonville Beach, FL 32250
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/7/86 Document number: J44305
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Interstate Registered Agent Corporation
701 Brickell Avenue, Suite 3000
Miami, FL 33131

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Agents and Corporations, Inc.
Suite E, 773 4th Avenue North
(P.O. Box NOT acceptable)
Naples, FL 34102

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, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

CHRISTOPHER V. MIER PRES.
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

2/10/05
(Date)

If signing on behalf of an entity:

Stefanie Hernandez
(Typed or Printed Name)

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

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

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