

THE LAW OFFICES OF
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K42684
C/29/01

DIVISION OF CORPORATIONS
AMENDMENT SECTION
P.O. Box 6327
TALLAHASSEE, FLORIDA 32314

200004660862--4
-10/31/01--01038--007
*****35.00 *****35.00

RE: STATEMENT OF CHANGE OF REGISTERED AGENT ADDRESS

DEAR SIRs:

ENCLOSED PLEASE FIND A STATEMENT OF CHANGE FORM FOR THREE CORPORATIONS, AND A CHECK FOR \$35.00 FOR EACH CHANGE FEE. PLEASE NOTE THAT IN ALL THREE CORPORATIONS THERE IS A NEW ADDRESS (LISTED ABOVE) AND PLEASE DOUBLE CHECK FOR THE SPELLING OF MY NAME.

IF YOU HAVE ANY QUESTIONS OR CONCERNS PLEASE DO NOT HESITATE TO CONTACT ME.

SINCERELY,

GREGORY E. SCHWARTZ, Esq.

GES/st

ENCLOSURES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 31 AM 9:17

FILED

K42684
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10-31-01

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

Pursuant to the provisions of Section 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, registered agent, or both, in the State of Florida.

1. The name of the corporation: **Insurance Management International, Inc.**

2. The mailing address of the corporation: **1208 W. Newport Centre Drive, #202 Deerfield Beach, Florida 33442**

3. Date of incorporation/qualification: **11/1/88** Document Number: **K426845**

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

Gregory E. Schwartz

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

Gregory E. Schwartz
4030-C Sheridan Street
Hollywood, Florida 33021

PLEASE CHANGE ADDRESS

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)

(Date)

Secretary
(Printed or typed name and title)

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 provision as registered agent.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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01 OCT 31 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA