

L70291

**MICRO DEVELOPMENT TECHNOLOGIES, INC.**

4700 North State Road 7, Suite 111  
Fort Lauderdale, FL 33319-5803

City/State/Zip

Phone #

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #) **900004484699--7**  
-07/18/01--01071--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☒ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

FILED  
01 JUL 18 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. LEWIS JUL 20 2001

Examiner's Initials

## STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section 607.0502(3), 617.0502(3), 607.1508(2), or 617.1508(2), Florida Statutes, the undersigned registered agent of a corporation organized under the laws of the State of FLORIDA submits the following statement in order to change the registered office in Florida.

1. The name of the corporation: MICRO DEVELOPMENT TECHNOLOGIES, INC.

2. The street address of the current registered office:

5739 West Sunrise Blvd

Plantation, FL 33313

3. The street address of the new registered office:

4700 North State Road 7

Suite #111

Fort Lauderdale, FL 33319-5803

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TALLAHASSEE, FLORIDA

The corporation has been notified in writing of this change.

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

Date: JULY 13, 2001

  
(Signature of Registered Agent)

Juanita Thompson

(Printed or Typed Name)

**Filing Fee: \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314**