N02000007218

Risin	Stars Even	ts
9715 W Planta	Broward Blvd Ion, FL 33324	4322
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
·		
		

Office Use Only



300119555873

03/07/08--01013--005 **35.00

OBMAR-7 PH 2:1

SECRETARY OF STA

ALLAHASSEE, FLOR

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, 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: KISING STANS EVENTS of South Florida, Inc
2. The principal office address: 9715 W-BROLPIO BLVD. #322
DIANTATION FL 33324
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/2002 Document number: NO200007218
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Regay Soltis
6000 S.W. 19 51RET = 8
37/ACC - AR F 1
PLANTOTION FL 33317
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
CUD Weiner BE 5
850 5. W. 87 FERRE
(P.O. Box NOT acceptable)
PLANTATION, FL 33324
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.
authorized by the board, of the corporation has been notified in writing of the change.
(Signature of an officer or director) (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.
light life MANCH 5,2008
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

(Typed or Printed Name)