N08000010480

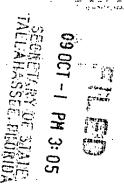
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
1
(Business Entity Name)
(Busiless Enuty Name)
(Document Number)
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10/01/09--01013--005 **35.00



L.A. Change

C.COULLIETTE

OCT 02 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corpora	tions				
SUBJECT:	Zapatero Interna	ational, Inc.			
DOCUMENT NUMBER:_	N080	000010480			
The enclosed Statement of C	hange of Registered Office	e/Agent and fee are submi	tted for filing.		
Please return all corresponde	nce concerning this matter	to the following:			
		•			
	Michael R	l. Shreve			
	Name of Cor	ntact Person	·		
Zapatero International, Inc.					
	Firm/Co	mpany			
	4424 Flint Addi	ock Loop			
	Addi	ess			
		00040			
	Lakeland, Flo City/State an	orida 33810 d Zin Code	 .		
	0.1g, 2.2.10 u.	2. p couc			
zapatero_inc@verizon.net					
E-mail a	ddress: (to be used for fi	iture annual report notif	fication)		
For further information conc	erning this matter, please o	all:			
Michael F	R Shreve	863 \	682-6252		
Name of Con		Area Code & Dayti	682-6252 me Telephone Number		
Enclosed is a \$35.00 check n	nade payable to the Depart	ment of State.			
Mai	ling Address: endment Section	Street Address Amendment Se	action		
	ision of Corporations	Division of Co			
	. Box 6327	Clifton Buildi	-		
	ahassee, FL 32314		e Center Circle		
	,	Tallahassee, F			

TO:

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

statement of change is	submitted for a corporation	7.0302, 607.1308, or 617.1308, Flor organized under the laws of the State	of Florida	
	·	registered agent, or both, in the State	of Florida.	
1. The name of the corporation: Zapatero International, Inc.				
2. The principal office	address: 4424 Flintlock L	oop, Lakeland, Florida 33810)	
3. The mailing address	(if different):			
4. Date of incorporation	on/qualification:11/14/	2008 Document number:	N08000010480	
	t address of the current registr of State: (If resigned, enter n	ered agent and registered office on fi- esigned)	le with the	
UNI	TED STATES CORPO	RATION AGENTS, INC.		
133	02 WINDING OAKS BL	LVD., SUITE A-100		
TAN	MPA FL 33612 US			
6. The name and street (if changed):	address of the new registere	d agent (if changed) and /or registere	d office	
Mich	nael R. Shreve			
442	4 Flintlock Loop		200	
	P.O. 1	Box NOT acceptable		
Lake	eland, Florida 33810			
The street address of as changed will be ide	its registered office and the	street address of the business office	of its registered agent.	
Such change was authorized by the boa	norized by resolution duly a rd, or the corporation has be	dopted by its board of directors or been notified in writing of the change	y an officer so	
8	Officer or director	Michael R. Shrev	e and title	
I hereby accept the ap I further agree to con of my duties, and I an document is being file corporation has been	ppointment as registered ag ply with the provisions of a n familiar with and accept the ed merely to reflect a chang more this ci	ent and agree to act in this capacity ill statutes relative to the proper and he obligation of my position as regi e in the registered office address, I hange.), I complete performance stered agent. Or, if this hereby confirm that the	
ZHANA	of Shun	September 2	29, 2009	
Sighature o	f Registered Agent	Date		
If signing on behalf o	f an entity:			
Typed or	Printed Name			
i y pour or	a 1112000 1700110			

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