## N41945

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SEURETARY OF STATE
ALL AHASSEE, FLORIDA

of no

## 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: Mystic Pointe Tower 500 Condominium Assoc
2. The principal office address: 3530 Mystic Pointe Vrive
Aventura, Florida 33/80
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/5/91 Document number: Nº1945
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
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and 5 std. 0. 17
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Plantation FL 3331/
6. The name and street address of the new registered agent (if changed) and /or registered office. (if changed):
Clazer and Associates, P.A. 50 & 0
1920 East Hally Jak Beach Blyd Br. &
Hallandale Beach FC 33009
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.
Patricia Zambello Patricia Zambello (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 mereby to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) 12-1-06 (Date)
If signing on behalf of an entity:

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