

P00000001485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

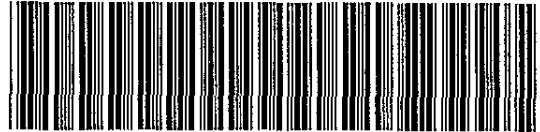
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600042682506

11/15/04--01028--014 **35.00

FILED
04 DEC 13 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FL 32311

G. Gonsky DEC 13 2004

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PADICO CORPORATION
(Name of corporation)

DOCUMENT NUMBER: P000000001485

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PASQUALE DI LEO
(Name of contact person)

PADICO CORPORATION
(Firm/Company)

3132 FORTUNE WAY D33
(Address)

WELLINGTON, FL, 33414-8728
(City/state and zip code)

For further information concerning this matter, please call:

AL ELLIOTT at (561) 791-8271
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 23, 2004

PASQUALE DI LEO
PADICO CORPORATION
3132 FORTUNE WAY D33
WELLINGTON, FL 33414-8728

SUBJECT: PADICO CORPORATION
Ref. Number: P00000001485

RECEIVED
04 DEC 13 AM 9:42
DIVISION OF CORPORATIONS

We have received your document for PADICO CORPORATION and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

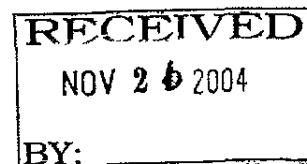
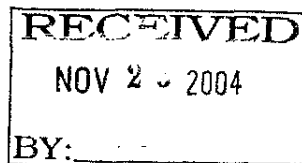
The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2003 annual report. The entity must be reinstated before this document can be filed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 804A00066470



**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PADICO CORPORATION
2. The principal office address: 3132 FORTUNE WAY, D33
WELLINGTON, FL 33414-8728
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: P00000001485
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LYNNE S.K. VENTRY ESQ.
955-N NW 17TH AVE.
DELRAY BEACH, FL 33445

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

PASQUALE DILEO
173 SE OSPREY RIDGE
(P.O. Box NOT acceptable)
PORT SAINT LUCIE, FL 34953

FILED
04 DEC 13 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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.


(Signature of an officer or director)

PAT DILEO, PRESIDENT
(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.


(Signature of Registered Agent)

11/12/04
(Date)

If signing on behalf of an entity:

PAT DILEO
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314