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Norman S. Moss, P.A.

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August 1, 2001


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*****35.00 *****35.00

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Gentlemen:

Enclosed herewith is my Statement of Change of Registered Office or Registered Agent or Both for Corporations, and check number 1555 written in the amount of \$35.00.

Sincerely,
The Law Office of Norman S. Moss, P.A.

By: 
Norman S. Moss

NM/tm

Enclosure

FILED
01 AUG -6 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. change

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**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,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.*

1. The name of the corporation : The Law Office of Norman S. Moss, P.A.

2. The mailing address of the corporation : P.O. Box 593436 Orlando, FL 32859-3436

3. Date of incorporation/qualification: 01/01/00 Document number: P00000002957

4. The name and address of the current registered agent and office:

Norman S. Moss

2203 E. Michigan Street

Orlando, FL 32806

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Norman S. Moss

4781 S. Orange Avenue

Orlando, FL 32806

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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.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

8/1/01
(Date)

Norman S. Moss/President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature]
(Signature of Registered Agent)

8/1/01
(Date)

If signing on behalf of an entity:

Norman S. Moss

(Typed or Printed Name)

(Capacity)

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