(Ranuactor's Mona)
LORD LADY OF MIAMI INC. 777 NW 72nd AVENUE # 2AA59 MIAMI, FL 33182
(City/State/Zip/Phone #)
(only, out of 2, printer n)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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10/07/03-01070-001 **35.00



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 ofFLORIDA
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: LORD LADY OF MIAMI, INC.
2. The mailing address of the corporation: 777 NW 72nd Avenue #2AA59
Miami FL 33182
3. Date of incorporation/qualification: 03=06=2000 Document number: P00000022458
4. The name and address of the current registered agent and office:
SARMIENTO CARLOS A.
721 NW 129 Ave
Miami ET 33182
5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)
Chantal Espinosa
721 NW 129 Ave.
Miami, FL 33182
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 esolution duly adopted by its board of directors or by an officer so authorized by the board.
- (SAMSALL) 10 - 02 - 03
(Signature of an officer, Chairman or vice chairman of the board) (Date)
Carlos Sarmiento A. (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 of Registered Agent) (Date)
If signing on behalf of an entity:
Chantel Espinosa
(Typed or Printed Name) (Capacity)

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