644 SOUTHEAST 4TH AVENUE FORT LAUDERDALE, FLORIDA 33301

> TELEPHONE (954) 764-6766 FACSIMILE (954) 764-6789

FILE NUMBER

2630-1

## CERTIFIED MAIL - RETURN RECEIPT REQUESTED

August 12, 2000

Department of State Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re:

Gibson Trust, Inc., Document No. N98000006565

Goldstar Financial International, Inc., Document No. P00000024764

Dear Madam:

Enclosed please find a State of Change of Registered Office or Registered Agent or Both for Corporations for each of the two referenced corporations. Also enclosed are two checks each in the amount of \$35.00 to cover the filing fee. Please revise your records accordingly.

Please contact my office if you require any additional information.

Sincerely yours,

E. SCOTT GOLDEN

ESG/eg

encs. CC:

Mr. Patrick O'Toole

WP2\C:\OFFICE\WPWIN\WPDOCS\CORP\SECSTATE.LTR

600003360996---08/17/00--01007--019 \*\*\*\*\*35.00 \*\*\*\*\*35.00

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

081400

|                                  |  | 7.0502, 617.0502, 607.1508<br>der the laws of the State of <u> </u>   |                            | Statutes,          |
|----------------------------------|--|---|----------------------------|--------------------|
| submits the follo                | wing statement in order to   | o change its registered offic   | e or registered agent, o   | r both, in         |
| the State of Flor                |  |   |                            |                    |
| 1. The name of t                 | he corporation is: <u>Go</u>   | ldstar Financial Inter  | national, Inc.             |                    |
|                                  |  |   |                            |                    |
| -                                | ddress of the corporation is orida 33064   | s: 4081 N. Federal Hi   | ghway, Suite 110C,         | Pompano            |
|                                  |  | l- 2 2000 Doow  | nent number: P0000002      | 1761               |
|                                  | poration/qualification: Man  |   | ment mannoer. 10000002     | 4704               |
| 4. The name and                  | l address of the current reg   | sistered agent and office:  |                            | -                  |
|                                  | Dashia Trowers   | s   |                            | S DIVIS            |
| <del>~~</del>                    | 4081 N. Federa   | al Highway, Suite 110C  | <b>.</b>                   | DO AUG 15 AM 11:57 |
| <del>-</del>                     |  |   |                            | <u>.</u>           |
| 5 The name and                   |  | , Florida 33064 ered agent and office: (P.O.  | Box Not Acceptable)        | =                  |
| J. The harre an                  | Timothy E. O'  |   | •                          |                    |
| -                                |  |   |                            | S                  |
| -                                | 4081 N. Feder  | al Highway, Suite 110A  | <u> </u>                   |                    |
| _                                | Pompano Beach  | , Florida 33064   | -                          |                    |
| The street addreagent, as change | ess of its registered office ed, will be identical.                                  | and the street address of the   | e business office of its r | egistered          |
| Such change wa                   | as authorized by resolution  | n duly adopted by its board   | of directors or by an off  | ficer so           |
|                                  | 10/2   |   | 8/12/00                    |                    |
| (Signature                       | of an officer, chairman or vice cha  | nirman of the board)  | (Date)                     |                    |
| Patrick J.                       | Canty-O'Toole, Presi   | dent.   |                            |                    |
|                                  | (Printed or typed name and t   | title)  |                            | _                  |
| corporation, I i                 | iereby accept the appoint<br>to comply with the provisi<br>my duties, and I am famil | and to accept service of pro-<br>ment as registered agent an<br>ions of all statutes relative t<br>liar with and accept the obl | to the proper and comp     | ete                |
|                                  | Signature of Registered Agent)   |   | 10/Avalox                  | <del>-</del>       |
| If signing on behal              | if of an entity:   |   | •                          |                    |
|                                  | Typed or Printed Name)   |   | (Capacity)                 | <del></del>        |
|                                  |  |   |                            |                    |

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

**DIVISION OF CORPORATIONS**