P00000026555

Florida Department of State
Division of Corporations
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To:
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Fax Number : (850)205-0380

From:
Account Name : LUSKY & MOTOLA, ESQ.
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Phone : (305)446-1245
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REGISTERED AGENT CHANGE

NATIONAL BLOOD CENTER, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	$35.00

RA Change
06/13/02

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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 : NATIONAL BLOOD CENTER, INC.

2. The mailing address of the corporation : 955 NW 3rd STREET, SUITE 200 MIAMI, FL 33128

3. Date of incorporation/qualification: 3-14-00 Document number: P00000026555

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

LUSKY & MOTOLA, P.A.
301 ALMERIA AVENUE, SUITE 345
CORAL GABLES, FL 33134

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

EDUARDO GUTIERREZ
c/o CANTERA & CO, P.A.
1762 CORAL WAY
MIAMI, FL 33145

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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] PRESIDENT　　6-12-02
(Signature of an officer, chairman or vice chairman of the board)　　(Date)

EDUARDO GUTIERREZ, 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] PRESIDENT　　6-12-02
(Signature of Registered Agent)　　(Date)

If signing on behalf of an entity:

EDUARDO GUTIERREZ　　PRESIDENT
(Typed or Printed Name)　　(Capacity)

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

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