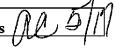


CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.				
(Corporation Name)	(Document #)	40000 -05/ ***	15507: 13/0201 ***35.00	L944 .084010 *****35.00
(Corporation Name)	(Document #)			
3. (Corporation Name)	(Document #)			
4. (Corporation Name)	(Document #)			
☐ Walk in ☐ Pick up time _		Certifie	ed Copy	
☐ Mail out ☐ Will wait	☐ Photocopy	Certific	cate of Statu	ıs
NEW FILINGS	<u>AMENDMENTS</u>			
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of I Change of Regis Dissolution/Wit Merger	stered Agent	SEC	
OTHER FILINGS	REGISTRATION/	QUALIFICAT		ა [*]
Annual Report Fictitious Name	Foreign Limited Partners Reinstatement Trademark Other	ship -	97.	

Examiner's Initials



CR2E031(7/97)

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

the undersigned corporation organized under the laws of the St.		-ioriaa siaiuiei	
submits the following statement in order to change its registere		gent, or both, i	n
the State of Florida.			
1. The name of the corporation:	INC.		
2. The mailing address of the corporation: 5045 NW 58NUGS FL. 33576	124 WAY, CO	Jun's	
3. Date of incorporation/qualification: 411100	Document number:	0000033	<u> </u>
4. The name and address of the current registered agent and offi-	ce:		
PATMICIA A. LAMIA			
10430 SW 134 ST.			
MIAMI, FL. 33176			
5. The name and address of the new registered agent (if changed (P. O. Box Not Acceptable)	. •	e (if changed):	<i>د</i> رت
AIMAL. S JAHISIM		_	
5045 NW 124 WAY	·		
CONDI SPAINES, FL	33076_		
The street address of its registered office and the street address agent, as changed, will be identical.	s of the business office	of its registered	l
Such change was authorized by resolution duly adopted by its authorized by the board.	board of directors or by	an officer so	
	-5/10/2	202	, .
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
TLEWIZING, AMAJ. & JEANSIM			
(Printed or typed name and title)		_	
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered ag I further agree to comply with the provisions of all statutes rel performance of hiv duties, and I am familiar with and accept to registered agent.	of process for the above ent and agree to act in a ative to the proper and he obligation of my pos	e stated this capacity. complete ition as	
	2/10/5003	_	
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:		8E0	cardant.
MICHAEL & LAMIA	ZLYOITING		8. §
(Typed or Printed Name)	(Capacity)	معمد په س	-
* * * FILING FEE: \$35.00	***	NY OF	
CR2E045(9/00) Division of Corporations P.O. Box 6327	Tallahassee, FL 32314	PN 12: 0 F STATE F LORIG	