## 1-00004/307

(Requestor's Name)	_
(Address)	-
(Address)	-
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



800175125698

04/12/10--01014--020 \*\*35.00

TO THE PERSON

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Office Use Only

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: X Press Rolling doors Inc.
DOCUMENT NUMBER: P000000 413 07
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pedro lui Name of Contact Person
Xpress Rolling doors Inc.
18505 Sw 104 Aug #9 HiAMI FL 33157
Mi Aui Fl 33157.  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pedro Li at (305) 805-4832.  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address:
Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

CR2E045 (8/05)

## 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, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Xbress Rolling doors Inc.
2. The principal office address: 18505 Sw 104 Aul #9
MiAMI F( 33157.
3. The mailing address (if different): 12212 Sw 210 ST
MIAMI FL 33177.
4. Date of incorporation/qualification: $\frac{4}{25}/2000$ Document number: $\frac{200000041307}{1307}$ .
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
All Florida Firm, INC  BIS Deltona Blvd Suit A  Deltona FL 32725  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Pedro lui  12212 Sw 210 st Miami Fl 33177.  P.O. Box NOT acceptable
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, or the corporation has been notified in writing of the change.
Pedro Coi Pedro loi (Presi dent) Signature of an officer or director  Printed or typed name another
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.  Pelse Cici  Signature of Registered Agent  Date
If signing on behalf of an entity:  Pedro Jui

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE