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Melbourne/Palm Bay Office

March 7, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

700005080367--8
-03/11/02--01048--014
*****35.00 *****35.00

Re: Atlantis Laboratories, Inc.

Dear Sir/Madam:

Enclosed are the following items:

1. Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above-mentioned corporation,
2. Reinstatement Fee in the amount of \$35.00.

Please process such change. Once the change of registered agent has been processed, please return evidence of such change to my office. In the event you have any questions, please advise.

Very truly yours,


JACK B. SPIRA

Enclosures

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 MAR 11 PM 3:00

RA Chg.

V SHEPARD MAR 15 2002

**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 : ATLANTIS LABORATORIES, INC.

2. The mailing address of the corporation : 700 JOHN RODES BLVD., UNIT #5B
MELBOURNE, FL 32904

3. Date of incorporation/qualification: 5/25/00 Document number: P00000051590

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

BUSINESS FILINGS INCORPORATED

1000 West Avenue, #1114

Miami Beach, FL 33139-0000

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

CHARLES M. GRAEF

205 Sea Dunes Drive

Melbourne Beach, FL 32951

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.

Charles M. Graef DIRECTOR/PRESIDENT
(Signature of an officer, chairman or vice chairman of the board)

3-6-02
(Date)

CHARLES M. GRAEF, DIRECTOR

(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.*

Charles M. Graef
(Signature of Registered Agent)

3-6-02
(Date)

If signing on behalf of an entity:

CHARLES GRAEF
(Typed or Printed Name)

(Capacity)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 MAR 11 PM 3:00