

P00000066135

Requester's Name

Ci

Phone #

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 JUN 13 PM 12:24

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 500004418315--5
-06/13/01--01085--017
*****35.00 *****35.00
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

RA Chg.

V SHEPARD JUN 25 2001

Examiner's Initials

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: KIARA ENTERPRISES INC.

2. The mailing address of the corporation: 90 Polaris, 66 Farnham Ave.
Hicksville, N.Y. 11801-5400

3. Date of incorporation/qualification: 7/10/00 Document number: P00000066135

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

NRAI Services Inc
526 EAST PARK AVE
TALLAHASSEE FL 32301

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

CASTOR A FERNANDEZ
4115 KIARA ST
COCONUT GROVE, FL 33133-6349

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.

X Castor A Fernandez
(Signature of an officer, chairman or vice chairman of the board)

X 6-5-01
(Date)

CASTOR A FERNANDEZ 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.

X Castor A Fernandez
(Signature of Registered Agent)

X 6-5-01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314