P0000066472

(Re	equestor's Name)	
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PICK-UP	MAIT WAIT	MAIL
uB)	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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ROChanse (10) 9/05/03

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: POMPANO BEACH THE	ERAPY, INC.	4	·舞士	
5020201	(Name of corporation)		
DOCUMENT NUMBER: P00000	066472			ti Sir Sir
The enclosed Statement of Change of	f Registered Office/Agent	t and fee are submitted	for filing.	
Please return all correspondence con	cerning this matter to the	following:		_
ALAN GREENFIELD, ESQ.				<u>.</u>
(Name of perso	on)		三	3
LAW OFFICES	• • • • • • • • • • • • • • • • • • • •			T = 1
(Name of firm/com	pany)		ASSE ASSE	2
15105 NW 77 AVENUE, SUITE 303	<u> 83 (8 5 5 5 5 5 </u>	·	一 四 四	D 2:
(Address)			9	55
MIAMI LAKES, FL 33014	,		9. Page 19.	
(City/state and zip	code)		_	e v
For further information concerning t	his matter, please call:			
WILLIAM GUTHRIE	at (954)	938-3770		
(Name of person)	(Area code &	daytime telephone num	ber)	
Enclosed is a \$35.00 check made page	yable to the Department of	f State.		
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations			·
P.O. Box 6327 Tallahassee, FL 32314	409 E. Gaines Street Tallahassee, FL 32399			

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

this statement	ne provisions of sections 607.0502, of change is submitted for a corpor	ation organized under the laws o	of the State of
FLORIDA	in order to change its regi	stered office or registered agent	, or both, in the State
of Florida.	- POMPANO PEAC	CH THEDADY INC	
1. The name of	f the corporation: POMPANO BEAC	SH TREMET, INC.	
2. The principa	al office address: 50 EAST SAMPLE	E RAD, SUITE 301, POMPANO BE	EACH, FL 33064
		<u> </u>	7 dect
3. The mailing	address (if different): P.O. BOX 5		
4. Date of inco	orporation/qualification: 07/11/20	00 Document number:	
	nd street address of the current registartment of State: JOEL MORRISON, ESQ.	stered agent and registered office	on file with the
	1501 NW 49 STREET, SUITE 200)	
	FT. LAUDERDALE, FL 33309		
changed):	ALAN GREENFIELD, ESQ. 15105 NW 77 AVENUE, SUITE 30 (P.O. Box or personal MIAMI LAKES, FL 33014		· · · · · · · · · · · · · · ·
The street add agent, as chan Such change vanthorized by	lress of its registered office and the ged will be identical. was authorized by resolution duly a the board, or the corporation has b	street address of the business of the characteristics of the business of the bu	or by an officer so
		WILLIAM GUTHRIE, PRES.	
(Signature of an office	er, chairman or vice chairman of the board)	(Printed or typed name and	•
I hereby accept further agree performance of registered age office address	ot the appointment as registered as e to comply with the provisions of a of my duties, and I am familiar with ent. Or, if this document is being further the corporation of the corporat	gent and agree to act in this capt all statutes relative to the proper h and accept the obligation of m iled merely to reflect a change in ation has been notified in writing	ry postition as n the registered g of this change.
- Gul	(Signature of Registered Agent)	0/No/03 (Date)	7A 03 S
If signing on beh	· · ·	from the state of	EP 22 PM
			SSE 2 FE
	(Typed or Printed Name) * * * FILING	(Capacity) FEE: \$35.00 * * *	FI.(
		DEPARTMENT OF STATE AND MAIL TO:)