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Office Use Only

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	(if known):
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☐ Walk in ☐ Pick up time	Certified.Copy	
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EW FILINGS	AMENDMENTS	
Profit Not for Profit	Amendment Resignation of R.A., Officer/Director	₹T3 -
Limited Liability Domestication Other	Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign  Limited Partnership  Reinstatement  Trademark  Other  V SHEPARD  7 2002	
	Other V SHEPARD 2 7 2002	<u> </u>
	Examiner's Initials	

CR2E031(7/97)

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## 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: NANA TU. PRODUCTIONS, INC. 2. The mailing address of the corporation: 1311 NW 11 PEMBROKE PINES 3. Date of incorporation/qualification: 09-13-2000 Document number: POOD 4. The name and address of the current registered agent and office: AURICIO ACOSTA NW 11 STREET embroke finer, Fl. 33028 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable) ALETANDRA CHAPARRO 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. officer, chairman or vice chairman of the board) AT200A **PESIDENT** (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.

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

CR2E045(9/00)

If signing on behalf of an entity:

27 . Was

(Capacity)

05-51-5005

7Date)

(Typed or Printed Name)

(Signature of Registered Agent)