P0000098582

(Requestor's Name)		
(Address)		
(1887000)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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Charge

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COVER LETTER

Amendment Section Division of Corporations

TO:

superce. Las Tui	nas Balcon De Oriente Co	nrn
SORTECT: Tago 1 at	(Name of C	
DOCUMENT NUMI	BER: P0000098582	
The enclosed Statemen	nt of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all corre	spondence concerning this matter	r to the following:
<u>Yo</u>	landa Carreno (Name of Co	ntact Person)
<u>Yo</u>	landa M Carreno Inc. (Firm/Co	ompany)
122	60 SW 8th Street, Suite 118 (Add	
Miar	mi, FL 33184 (City/State ar	nd Zin Code)
For further information	n concerning this matter, please of	, ,
Yolanda Carreno (Name	of Contact Person)	at (305) 554-4032 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 c	heck made payable to the Depart	ment of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

, 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Las Tunas Balcon De Oriente Corp.
2. The principal office address: 395 East 1st Avenue
Hiałeah, FL 33010
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/19/2000 Document number: P0000098582
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Fe Sarduy
6020 NW 110 Terrace
Hialeah, FL 33012
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Alfredo Mesa
8740 NW 150th Terrace
(P.O. Box NOT acceptable)
Miami Lakes, FL 33018
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.
(Printed or typed name and title)
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.
(Signature Registered Agent) (Date)
If signing on behalf of an entity:
Alleeno MESA
(Typed or Printed Name) * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)