

P00000105736

Requester's Name

1457 Dredg Ave

Address

Miami, Fla 33139

City/State/Zip

Phone #

305-532-2252

Office Use Only

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

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 300004778323--5  
-01/16/02--01062--003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
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

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

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

**REGISTRATION/QUALIFICATION**

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

FILED  
02 JAN 16 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 22 2002

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.

- the State of Florida.
1. The name of the corporation : STUDIO LUCIFERO INC.
2. The mailing address of the corporation : 1457 DREXEL AV.  
MIAMI BEACH FL 33139
3. Date of incorporation/qualification: 11/13/2000 Document number: P00000105736
4. The name and address of the current registered agent and office:
- ANDREA CONTE  
3 ISLAND AV #9-E  
MIAMI BEACH FL 33139
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)
- RENEE SAVARY  
1457 DREXEL AV  
MIAMI BEACH FL 33139
- 02 JAN 16 AM 11:01  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

(Signature of an officer, chairman or vice chairman of the board)

01/14/2002  
(Date)

RENEE SAALEY, SECRETARY  
(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.

(Signature of Registered Agent)

01/14/2002  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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