## P00000/09173

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## COVER LETTER .

Amendment Section Division of Corporations

TO:

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## 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 FLDKIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PERFECT COMMUNICATIONS AND PROMOTIONS WO
2. The principal office address: 1800 W. INTW'L SPEEDWAY BLVD,
BLOG 1, SUITE 104, DAYTONA BEACH, FL. 32114
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 1/-20-2111 Document number: Postero 109/73
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JOHN M. BUNDY
244 BELLEVUE HVE
DANTHUA REACH FL 32HY = 17
DATTODA DATOL, 1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ANNETTE FLORAVANTI
1800 W. International Speedway Blue
Bldg 1, SR.Q. Box NOT acceptable)
Daytona Beach, Fl. 32114
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.
(Signature of an officer or director)  TOHN MCLANE RESIDENT  (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to get in this agreeity
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.
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
copporation has seen motified of this change.
Mall Florest 1/18/05
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
ANNETTE FIORPYANTI
(Typed or Printed Name)

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