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	orporation Name)	(Document #)		STATE STATE	O
4(Corporation Name)		(Document #)			
☐ Walk in	Pick up time		Certified		-
■ Mail out	■ Will wait	Photocopy	Certificat	te of Status	•
NEW FILINGS	<u>S</u>	<u>AMENDMENTS</u>	•		
Profit Not for Pro Limited Lia Domesticat Other	bility	Amendment Resignation of R Change of Registe Dissolution/Without Merger	ered Agent	ector	
OTHER FILINGS		REGISTRATION/Q	UALIFICATI	<u>ON</u>	
Annual Rep Fictitious N		Foreign Limited Partnersh Reinstatement Trademark Other	ip -		

CR2E031(7/97)

T BROWN MAR 2 5 2002

Examiner's Initials

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

the undersigned corpora	ution organized under the l	laws of the State of <u>F</u>	r 617.1508, Florida Statutes, LORIDA r registered agent, or both, in
the State of Florida.			
1. The name of the corpo	oration: ANNACAR	ENTERPRISES	, INC.
2. The mailing address o	of the corporation: 227	1 S Ridgewood	d Ave
	S. DAYTO	ONA, FL 3211	7
3. Date of incorporation	qualification: JAN. 22	., 200 2 Document	number: <u>PO2 0 6600</u>
	s of the current registered a		是
_Joa	one m Longs	rolo	egistered office (if changed in
	9 DAYTONA AVE		SEE
	Ly HILL, FL 321		FS
5. The name and address	of the new registered age (P. O. Box N	nt (if changed) and/or re lot Acceptable)	gistered office (if changes)
<u>CAR</u>	LO P LOMQSCOL	0	
	9 DAYTONA AUE	'	
_ Ho	Lly Nell, FL 32	117	·
The street address of its agent, as changed, will t	registered office and the special identical.	street address of the bus	siness office of its registered
Such change was author authorized by the board.	rized by resolution duly ad	lopted by its board of d	irectors or by an officer so
Carleyansu			
(Signature of an office	r, chairman or vice chairman of th	e board)	(Date)
CARLO LOMAS COL	_o Vice Presine we do typed name and title)	<u>T</u>	
			for the above stated ree to act in this capacity. e proper and complete on of my position as
(ali) made	*	3-14-	৩৪
(Signature of	Registered Agent)	3-14- (Di	ate)
f signing on behalf of an ent	ity:		
(Typed or Pr	inted Name)		Caracita
(Typed of PT	micu Name)	(	(Capacity)
	* * * FILING I	FEE: \$35.00 * * *	
CB2E045/9/00)			

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS