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(Re	equestor's Name)	
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PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · ·
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Name of corporation) DOCUMENT NUMBER: UNAFORM POP5 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

STHWALA. ARISH. J. - SHAKTI, ANC (Name of firm/company) $\frac{\mathcal{E}}{(\text{Address})}$ (City/state and zip code)

For further information concerning this matter, please call:

HWAIA (Area code & daytime telephone number) of person)

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

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

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 ト 10PINA in order to change its registered office or registered agent, or both, in the State

 The name of the corporation: <u>KAM - SHAKT</u> <u>LAC</u> The principal office address: <u>1800</u>, <u>N.E.</u> <u>110</u>Th <u>STREET</u> <u># 602</u> <u>N. Woau</u>, <u>FL</u>; <u>33181</u> The mailing address (if different): <u>SAHCE</u> Date of incorporation/qualification: <u>02120</u> Document number: <u>UBR</u> The name and street address of the current registered agent and registered office on file with the 	
N. Wai Fb.; 33181. 3. The mailing address (if different):	the corporation: KAM - SHAKA INC
N. Wai Fb.; 33181. 3. The mailing address (if different):	I office address: 1800. N.E. 114 STREET # 602
4. Date of incorporation/qualification: 02/12/02 Document number: UBR	
	address (if different):
5. The name and street address of the current registered agent and registered office on file with the	poration/qualification: <u>02/12/02</u> Document number: (<u>UBR</u>)
Florida Department of State;	
PAUL Shirth	PAUL Shith
218. SOUTHERS COUNTRY LANE.	218. SONTHERS COUNTRY LANE.
- Onlivery; FR- 32351,	- Ouldary; FL; 32351.
6. The name and street address of the new registered agent (if changed) and /or registered office (if	nd street address of the new registered agent (if changed) and /or registered office (if
changed): <u>HARISH. J. GIHWALA.</u> 3	HARISH. J. GAHWALA.
$\frac{1800. \text{N.E. } 119^{\text{TV}} \text{ST. } #602}{\text{(P.O. Box or personal mailbox NOT acceptable)}}$	1800, N.E. 119 ST. #602
(P.O. Box or personal mailbox NOT acceptable)	

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.

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

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 of Registered Spent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

 $\mathbf{ }$

(Date)

OF STATE RPORATIONS

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314