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SECRETARY OF STATE
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COVER LETTER .

то:	Amendment Section Division of Corporations
SUBJ	TECT: ISLANDER RESEARCH CORPORATION (Name of corporation)
DOC	UMENT NUMBER: #P02000030227 •,
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
	Fred E. Chapman (Name of contact person)
	ISLAMBER RESEARCH CORP. (Firm/Company)
	3807 ALCANTARA AVE. (Address)
	MIAMI FL 33178 (City/state and zip code)
For fu	rther information concerning this matter, please call:
FR	ED CHAPMAN at (104) 361-13/5 (Name of contact person) (Area code & daytime telephone n
	sed 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 Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of chan	ge is submitted fo	r a corporation organi	2, 607.1508, or 617.1508, Florida Statute. zed under the laws of the State of red agent, or both, in the State of Florida.	
1. The name of the	e corporation:	ISLANDER RESE	EARCH CORPORATION	
2. The principal o	-	807 Alcantara Avenue	, Miami, FL 33178	
3. The mailing add	dress (if different)	X	•,	
4. Date of incorpo	ration/qualification	on: March 19, 2002	Document number: #P020000302	227
5. The name and s Florida Departs		e current registered ag	ent and registered office on file with the	
		William E. Chapman		
	38	307 Alcantara Avenue		TAT C
		Miami, FL 33178		05 SEP SECRETA
6. The name and s (if changed):	treet address of th		(if changed) and /or registered office	SEP 19 PM SETARY OF STANASSEE FLO
-	ANNA	< H APP M	AN	
	3	807 Alcantara Avenue)	42 DA
		(P.O. Box NOT acceptable)		
-		Miami, FL 33178		
The street address as changed will be	of its registered e identical.	office and the street a	ddress of the business office of its regis	tered agent,
Such change was authorized by the	authorized by res board, or the cor	solution duly adopted poration has been noti	by its board of directors or by an officer ified in writing of the change.	r so
Tractine	E. Cha on or an or	ga.	Fred E. Chapman, D - P	
I hereby accept th I further agree to of my duties, and document is being corporation has b	e appointment as comply with the I am familiar wit I filed merely to r een notified in w	registered agent and provisions of all status h and accept the oblig effect a change in the riting of this change.	agree to act in this capacity, tes relative to the proper and complete p ation of my position as registered agent registered office address, I hereby conf	performance t. Or, if this irm that the
(Itta C	tap Man	8-16-05	
(Signa	ture of Registered Ago		(Date)	
If signing on beha	lf of an entity:			
CTvo	ed or Printed Name)			

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