

Florida Department of State

Division of Corporations Public Access System

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DIVISION OF CORPORATION

REGISTERED AGENT CHANGE

SYMA INTERNATIONAL AND DISTRIBUTION, CORP.

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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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: SYMA INTERNATIONAL AND DISTRIBUTION, CORP. 2. The principal office address: 3016 NW 72 AVE MIAMI, FL 33122 3. The mailing address (if different): SAME 4. Date of incorporation/qualification: 06/12/02 Document number: P02000064956
of Florida. 1. The name of the corporation: SYMA INTERNATIONAL AND DISTRIBUTION, CORP. 2. The principal office address: 3016 NW 72 AVE MIAMI, FL 33122 3. The mailing address (if different): SAME
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3. The mailing address (if different): SAME
OCHIOMO December 1979
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4. Date of incorporation/qualification: 06/12/02 Document number: P02000064956
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$\mathcal{D}_{\mathcal{C}}$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
OSCAR SILVA
3003 NW 73 AVE
3002 NW 72 AVE
MIAMI, FL 33122
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): LUIS MARTINEZ
TOAR MALTO MAT
3016 NW 72 AVE (P.O. Box or personal mailbox NOT acceptable)
MIAMI, FL 33122
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.
LUIS MARTINEZ (P)
An officer, chairman or vice chairman of the board) (Printed or typed name and title)
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.
6/16/03
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

* * * 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