1902000085170

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Skyletates 2.ph Helie ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

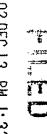
Office Use Only



100009303201

12/13/02--01053--005 **35.00

02 DEC 13 PM 1:32



P 12/27/02

TRANSMITTAL LETTER

Division of Corporations

SUBJECT: Sophisticated Tuteriors, Tue.

(Name of corporation)

DOCUMENT NUMBER: PO200085 (70)

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:

VLA d Westerewo

(Name of person)

(Name of firm/company)

407 SE 944 C+ 44

(Address)

HALLAWA ALE FL 33000.

(City/state and zip code)

For further information concerning this matter, please call:

VLA d Westerewo

(Name of person)

(Name of person)

(Name 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

TO:

Amendment Section

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
FLOTICIA in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Sophisticated Tuterious, Tue.
2. The principal office address: 407 SE 9H4 CF # 4 HALLANDALE FL 33009
3. The mailing address (if different):
4. Date of incorporation/qualification: 08.05.02 Document number: P02000085
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: PAUL Lifvinov 3741 NE 163d Sfr # 263 N MiAMI BCH FL 33160
6. The name and street address of the new registered agent (if changed) and /or registering office (if changed): ULADIMIT NESTEROW (P.O. Box or personal mailbox NOT acceptable) HALLANDALE FL 33009
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. Western President (Signature of an officer, 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.
(Signature of Registered Agent) If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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

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