## P02000113477

(Requesi	or's Name)
(Address	
(Address	}
(Address	)
(City/Stat	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	s Entity Name)
(Docume	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:
Off	ce Use Only



300020572293

06/23/03--01055--005 \*\*35.00

O3 JUN 23 PM 2: 42
SECHETARY OF STATE

Cos cos sins con

## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations								
SUBJ	ECT: POWER SMOOTHIE CAFE FRANCHISING, INC.								
	(Name of corporation)								
DOC	UMENT NUMBER: P02000113477								
The er	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.								
Please	return all correspondence concerning this matter to the following:								
	Don A. Paradiso, Esq.								
	(Name of person) Don A. Paradiso, P.A.								
	(Name of firm/company)  2401 E. Atlantic Blvd., Suite 314								
	(Address)								
	Pompano Beach, FL 33062								
	(City/state and zip code)								
For fu	rther information concerning this matter, please call:								
	Don Paradiso at (954 ) 782-5006  (Name of person) (Area code & daytime telephone number)								
	(Name of person) (Area code & daytime telephone number)								
Enclos	sed is a \$35.00 check made payable to the Department of State.								
Ameno Divisio P.O. B	Amendment Section On of Corporations Ox 6327 Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399								

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

Pursuant to the	provisions of sections 607.0	0502, 617.0502	, 607.1508, or 6	17.1508, F	Iorida Statut	es,
this statement of	change is submitted for a co	rporation orga	nized under the l	aws of the S	State of	
Florida	in order to change its	registered offic	ce or registered o	agent, or be	oth, in the Sta	ate
of Florida.		م ا <del>۔</del> آ۔ س			<b>T</b>	
1. The name of t	the corporation: Power S	Smoothie C	afe Franch	ising,	inc.	
2. The principal	office address: 5499 N.	. Federal	Hwy., Suit	e B		
Boca Rator	1. FL 33487	 	e at the			<u> </u>
3. The mailing a	ddress (if different):				·	
4. Date of incorp	poration/qualification:10	0/21/ <u>0</u> 2	Document nu	mber: P0	20001134	77
5. The name and	I street address of the current tment of State:					
	James Traina	:=====================================				
	5499 N. Feder	ral Highwa	y, Suite B		Fr p	,
	Boca Raton, F	Florida 33	487		S E	
6 The name on	d street address of the new	ranistared ages	ut (if chanced) a	nd for regi	S FA	(if
changed):	d sitest address of the new	registered agei	it (ii changed) a	na /or rogn	MX T	( La Calazan
	Don A. Paradi	iso, Ešą.			- F	M
	2401 E. Atlar	ntic Blyd.	, Suite 31	4 =	STAI OR	D
_	· · · · · · · · · · · · · · · · · · ·	ersonal mailbox NOT			Sale V	
_	Pompano Beach	1, FL 3306	) Z		•	
The street addre	ess of its registered office and ed will be identical.	d the street add	ress of the busin	ess office o	f its registere	ed.
	is authorized by resolution due board, or the corporation h					
Umd	chairman or vice chairman of the board)	Don	A. Paradis	o, Secr		
I furthër agrêe i performance of registered agen	the appointment as registere to comply with the provisions my duties, and I am familiar t. Or, if this document is beil fereby Jonfirm that the corp	s of all statutes with and acce ine filed merely	relative to the p pt the obligation to reflect a char	roper and c of my posi nge in the r	ition as egistered	
uma	gnature of Registered Agent)	June	19, 2003	· · · -		
If signing on behalf		g t	, a,			
			<u> </u>	· 查		
<u>u</u>	yped or Printed Name)		(Capaci	ty)		

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