## P02000116127

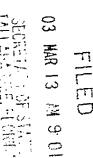
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1. A. Change 3/19/03

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: VICK'S REMOLDING, INC.
(Name of corporation)
DOCUMENT NUMBER: PO2000116127
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:
SOPHIA CATHERINE ECHEVERRY
(Name of person)
VICKY'S REMOLDING, INC.
(Name of firm/company)
8264 N. W. 58TH STREET
(Address)
MIAMI, FLORIDA, 33166
(City/state and zip code)
For further information concerning this matter, please call:
SOPHIA CATHERINE ECHEVERRY at ( 786 ) 344-7745
SOPHIA CATHERINE ECHEVERRY at ( 786 ) 344-7745  (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, 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	f change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State	
of Florida.		
1. The name of	the corporation: VICKY'S REMODELING INC.	
2. The principal	office address: 8264 N. W. 58TH STREET, MIAMI, FLORIDA 33166	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 10/28/02 Document number: PO2000116127	
	I street address of the current registered agent and registered office on file with the current of State:  LUZ PATRICIA SALAZAR	
	7220 S.W. 132 AVENUE.	
	MIAMI, FLORIDA 33183	
6. The name and street address of the new registered agent (if changed) and /or registered changed):		
,	SOPHIA CATHERINE ECHEVERRY	
	8264 NW 58TH STREET	
,	(P.O. Box or personal mailbox NOT acceptable)	
	MIAMI, FLORIDA 33166	
agent, as chang	ess of its registered office and the street address of the business office of its registered ed 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.		
(Signature of an office	chairman or vide chairman of the board) (Printed or typed name and title)	
I hereby accept I further agree performance of registered agen office address,	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as to the complete to the proper and complete my duties, and I am familiar with and accept the obligation of my position as to the complete to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.	
xx Golhung	ignature of Registered Agent) (Date)	
If signing on beha	f of an entity:	
	Typed or Printed Name) (Capacity)	

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