Posovolaio98

Antilles Mortgage Corp. P.O. Box 355035 Palm Coast, FL 32135		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
, , , ,		
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GOS SANON

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

the undersigned corporation organized under the laws of	•
submits the following statement in order to change its r	
the State of Florida	
1. The name of the corporation: Antilles	mortgage Corp.
2. The mailing address of the corporation:	
3. Date of incorporation/qualification:	2 Document number: Po2000/2/09
4. The name and address of the current registered agent a	
_	the second of th
Antilla Fagan 4 Bowie Place	
4 Bowie Place	Ser
Falm Coast. FL	
5. The name and address of the new registered agent (if a (P.O. Box NOT Ad	
	Sceptable) Sim o
Khalid Myneer	
- 3 Village Lane	
Palm Coast. FL :	32164
The street address of its registered office and the street agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted authorized by the board.	by its board of directors or by an officer so
	10-10-03
(Signature of an officer, chairman or nee chairman) of the board	(Date)
(Printed or typed name and title) Having been named as registered agent and to accent s	Myk President
Having been named as registered agent and to accept s corporation, I hereby accept the appointment as registe I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a registered agent.	ervice of process for the above stated red agent and agree to act in this capacity. utes relative to the proper and complete ccept the obligation of my position as
(Signature of Registered Agent)	10-10-03
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)
•	• • • •

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