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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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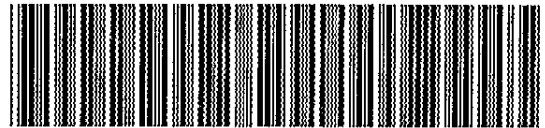
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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6.6.03

TRANSMITTAL LETTER

Department o State
Division f Corporation
P.O. BOX 6327
Tallahassee, Florida 2314

May 13, 2003

SUBJECT: Gramar Kitchen Design, Corp.

Enclosed please find Statement of Change of Registered Office or Registered Office, or both for the above corporation and check in the amount of \$35.00.

FROM: Baldomero Menchero
8207 S.W. 172nd Terrace
Miami, Florida 33157



Florida Department of State, George Firestone, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1) The name of the corporation is:

Gramar Kitchen Design, Corp.

2) The address of its present registered agent is:

8207 S.W. 172nd. Terrace, Miami, Florida 33157

3) The address to which its registered agent is to be changed is:

G343 SW 150 Court Miami FL 33193

4) The name of its present registered agent is:

Baldomero Menchero

5) The name of its successor registered agent is:

Juan Carlos Luis

The address of its registered agent and the 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.

Dated May 13 2003 ~~199x~~

Gramar Kitchen Design, Corp.

(exact corporate name)

SIGNATURE

(President or Vice President)

Juan Carlos Luis

DATE May 13, 2003

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE

(Registered Agent)

Juan Carlos Luis

DATE

FILING FEE: 35.00
~~\$20.00~~

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TALLAHASSEE, FLORIDA