## P03000034228

. (Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Sleven J. Bartara		
AUTHORIZATION BY PHOTE I Name		
D811106		

Office Use Only



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08/02/06--01026--004 \*\*35.00

DIVISION OF CORPORATION

RA Change

D. GOWNELL AUG 1 0 2006

## **COVER LETTER**

Division of Corporations		
SUBJECT: Secure Business Solutions Inc. (Name of Co	rporation)	
DOCUMENT NUMBER: P03000034228		
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:	
Steven Barbara		
(Name of Cont	tact Person)	
Secure Business Solutions Inc.		
(Firm/Cor	npany)	
5811 Memorial Hwy Ste. 108		
(Addre	ess)	
Tampa, FL 33615		
(City/State and		
For further information concerning this matter, please ca	ill:	
Steven Barbara	at ( 813 ) 908-9690 Ext. 1	
(Name of Contact Person)	at (813 ) 908-9690 Ext. 1 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Departn		
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (8/05)

Tallahassee, FL 32314

## , 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 organi	
in order to change its registered office or registe	red agent, or both, in the State of Florida.
1. The name of the corporation: Secure Business Solution	is Inc.
2. The principal office address: 5811 Memorial Hwy Ste.	108, Tampa, FL 33615
3. The mailing address (if different): Same as above	
4. Date of incorporation/qualification: 03/25/2003	Document number: P03000034228
5. The name and street address of the current registered ag Florida Department of State:	gent and registered office on file with the
steven J. Barbaro	<u> </u>
3837 Northdale Blvd. Ste 107	ON SEVEN
Tampa, FL 33624	6 AUG
6. The name and street address of the new registered agen (if changed):	70
Steven J. Bar	bara
5811 Memorial Hwy Ste 108	35
(P.O. Box NOT acceptable)	
Tampa, FL 33615	
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board of the corporation has been not	by its board of directors or by an officer so tified in writing of the change.
(Signature of all officer or director)	Steven Barbara President (Printed or typed name and title)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all state of my duties, and I am familian with and accept the oblidecument is being filed in my left to reflect a change in the corporation has been notified in writing of this change.	l agree to act in this capacity. ttes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
- XXXX	07/28/06
If signing on behalf of an entity:	(Date)
Steven Barbara	
(Typed or Printed Name)	

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