03000035995

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) [PICK-UP			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Re	questor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Ad	dress)	
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Certified Copies Certificates of Status	(Bu	siness Entity Nar	ne)
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JUL 1 3 2004

TRANSMITTAL LETTER

SUBJECT: MIRACLE AUTO COLLISION, INC. (Name of corporation) DOCUMENT NUMBER: P03000035995 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: MILTON OMIER (Name of person)				
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: MILTON OMIER				
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MILTON OMIER				
(Name of person)				
KG ENTERPRISES, INC.				
(Name of firm/company)				
15126 WEST DIXIE HIGHWAY				
(Address)				
NORTH MIAMI BEACH, FL 33162				
(City/state and zip code)				
For further information concerning this matter, please call:				
101 Miller Miteriation concerning and matter, prease can.				
MILTON OMIER at (305) 948-6145 (Name of person) (Area code & daytime telephone i				
(Name of person) (Area code & daytime telephone	iumber)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

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

change is submi	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, t itted for a corporation organized under the laws of the State of FLORIDA	his state	ment of in order
to change its reg	zistered office or registered agent, or both, in the State of Florida.		
1. The name of	the corporation: MIRACLE AUTO COLLISION, INC.		
2. The principal	office address: 2176 NW 22ND AVENUE		
MIAMI, FL 3	3162		
3. The mailing a	Address (if different):		
4. Date of incor	poration/qualification: 03/24/2003 Document number: P030000035995		
	istreet address of the current registered agent and registered office on file with the rement of State:		
	JOHN KENDALL		
	2176 NW 22ND AVENUE	_	
	MIAMI, FL 33142	JYI SE(40
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	LAHASSE METARY	JUL-2 AH
	JOSE F FERNANDEZ	- T.S.	₹ :
	2176 NW 22ND AVENUE		
	(P.O. Box or personal meithon NOT acceptable)		
	MIAMI, FL 33142	•	
The street addrechanged will be	ess of its registered office and the street address of the business office of its register e identical.	ed agen	it, as
Such change withe board, or th	as authorized by resolution duly adopted by its board of directors or by an officer second resolution has been notified in writing of the change.	o author	rized by
100	JOSE F FERNANDEZ,		
I hereby accept I further agree duties, and I an	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 per familiar with and accept the obligation of my position as registered agent. Or, if ely to reflect a change in the registered office address, I hereby confirm that the converting of this change.	rforman	ce of my cument is on has
10-	JUNE 15, 2004	* ≃	
	(Signature of Registered Agent) (Date)	······································	
If signing on be	shalf of an entity:		
	(Typed or Printed Name) (Capacity)	····	

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