P03000052987

(Re	equestor's Name)	
(Address)		
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(C	ity/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
В	usiness Entity Nar	me)
(D	ocument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: TIU CORP. (Name of corporation)		
DOCUMENT NUMBER: P03000052987		
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:		
(Name of contact person)		
(Firm/Company)		
(Linia Company)		
609 E. Jackson St., Ste. 100 (Address)		
Tampa FL 33602-4906 (City/state and zip code)		
For further information concerning this matter, please call:		
D. Lee Pitisci at (813) 228-9233 (Name of contact person) (Area code & daytime telephone number)		
(Name of contact person) (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Street 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

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 organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TIU CORP.
2. The principal office address: 609 E. Jackson St., Ste. 100
Tampa, FL 33602-4906
3. The mailing address (if different):
4. Date of incorporation/qualification: 5-13-03 Document number: P03000052987
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Thomas S. Martino
1207 N. Frankling St. Suite 101
Tampa, FL 33602
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): D. Lee Pitisci 609 E. Jackson St., Ste, 100 (PO. Box NOT acceptable)
D. Lee Pitisci
(PO. Box NOT acceptable)
Tampa FL 33602-4906
The street address of its registered office and the street 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 or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer operation) Thomas S. Machino President (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent)
If signing on behalf of an entity: D. Lee Pit Sci (Typed or Printed Name)

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