P03000060467

*		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone#	
(Cit	y/State/Zip/Pfione #	,
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	·

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SECRETARY OF STATE
TALLAHASSEE, FLORIS

C.COULLIETTE
MAY 06 2009

EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: Florida SALES REALTY, INC. (Name of Corporation)			
DOCUMENT NUMBER: P030000 60467			
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)			
(Name of Contact Person)			
Florida SALES REAL ty, INC. (Firm/Company)			
(Firm/Company)			
5341 W. ALLANTIC AVE # 301			
(Address)			
DEIRAG BEACH FL 33484 (City/State and Zip Code)			
For further information concerning this matter, please call:			
•			
(Name of Contact Person) at (561) 573 - 6800 (Area Code & Daytime Telephone Number)			
(Yunie of Condet Person) (Yunie Perephone Wunier)			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address: Amendment Section Amendment Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32314 Zoo1 Executive Center Circle Tallahassee, FL 32301			

CR2E045 (8/05)

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	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: FlorIDA SALES REAL ty, INC.	
1. The name of the corporation: Florida SALES REALTY, INC. 2. The principal office address: 5341 W. A4LANTIC AVE. #301 DEIRAY BEACH, FL 33484	
3. The mailing address (if different):	
4. Date of incorporation/qualification:(\(\frac{1}{2}\)\) _03 Document number: Pos	·07
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
10563-EastKey Dr.	
Boca Raton Fl 33498	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
DSIRAY BEACH, FL 33484	
(P.O. Box NOT acceptable)	
	٠.
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.	
(Rignature of an officer of director) BRIAN ROSS NAN PRESIDENT (Printed or typed name and inte)	-
(Fignature of an officer of director) 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.	
4-27-09	
If signing on behalf of an entity:	
(Typed or Printed Name)	
* * * FILING FEE: \$35,00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)