

PO 3000066978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

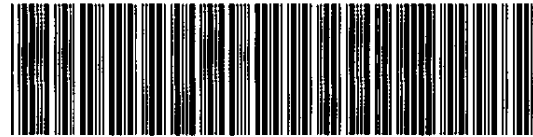
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

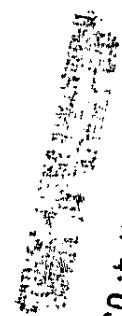
7/1/10



200182608182

06/30/10--01018--004 **35.00

RA
Change
SP



2010 JUN 30 PM 4:03

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FOREIGN ENTERPRISES INC
Name of Corporation

DOCUMENT NUMBER: P03000066298

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:

PATRICIA A. BARGFREDE - CONNELLA
Name of Contact Person

FOREIGN ENTERPRISES INC.
Firm/Company

3208 FOREST HILL BLVD
Address

PALM SPRINGS FL 33406
City/State and Zip Code

PATMCBAGD@ADL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICIA CONNELLA at (917) 692-4826
Name of Contact Person Area Code & Daytime Telephone Number

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: FOREIGN ENTERPRISES INC
2. The principal office address: 3208 FOREST HILL BLVD
PALM SPRINGS FL 33406
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/13/2003 Document number: P03000066298

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)

BARBFREDE - GONNELLA, PATRICIA A
132 WOODLAND RD
LAKE WORTH FL 33461

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

BARBFREDE - GONNELLA, PATRICIA A.
3310 LAGO DE TALAVERA
P.O. Box NOT acceptable
WELLINGTON, FL 33467



2010 JUN 30 PM 4:03

FILED

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.

Patricia A. Barbfrede-Gonnella
Signature of an officer or director

PATRICIA A BARBFREDE-GONNELLA, PRES
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.

Patricia A. Barbfrede-Gonnella
Signature of Registered Agent

6/24/10
Date

If signing on behalf of an entity:

Typed or Printed Name

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