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(((H03000302498 3)))

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To:

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From:

Account Name : RANI HOTEL MSB Account Number : I20030000114 : (786)276-6100 Phone

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REGISTERED AGENT CHANGE

HEVAN INC.

Certificate of Status	0
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10/23/2003



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 23, 2003

HEVAN INC. 1000 COLLINS AVENUE MIAMI BEACE, FL 33139US

SUBJECT: HEVAN INC. REF: P03000074750

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Darlene Connell Document Specialist

FAX Aud. #: H03000302498 Letter Number: 403A00057934

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Tevan Inc. (Name of corporation)		
DOCUMENT NUMBER: P0300074750		
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:		
Scott W. Egraet, Esq. (Name of person)		
Barger Law Offices (Name of tirm/company)		
420 Luncoln Road, Ente 372		
Munio Beech FL 33139 (City/state and zip code)		
For further information concerning this matter, please call:		
Scott W. Bourger, Seq., at (April 276-6100) (Name of person) (Area code & daytime telephone number)		
Euclosed is a \$35.00 check made navable to the Department of State		

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

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, thi sitted for a corporation organized under the laws of the State of Florida	
	gistered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Hevan Inc.	
The principal	office address: 1000 Collins Avenue	
	Muni Beach, FL 33139	
3. The mailing a	address (if different): 1000 CSIMS Arabve	<u> </u>
	Man Back Fl 33139	
4. Date of incorp	poration/qualification: 07/08/2003 Document number: PO3000	14750
	d street address of the current registered agent and registered office on file with the rement of State:	,
•	Centry Small Exerness Soldfrens	DIVISION OF TOUR STATES
	4403 Vineland Road, Sute B12	
	Orlando FI 32811	F COR
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	PM 3:
	Scatt W. Fried Sea	JATERS 3: 3 6
,	420 Lincoln Road, Side 372	_
	(P.O. Box or personal mailbox NOT acceptable) Www. Beach E 38139	
The street addre	ss of its registered office and the street address of the business office of its registered identical.	agent, as
Such change wa	s authorized by resolution duly adopted by its board of directors or by an officer so at corporation has been notified in writing of the change.	ithorized by
* 5	Avan Alas at Saw (Printed or typed name and title)	y Tresdant
I hereby accept i I further agree to duties, and I am being filed merei been notified in v	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 perfor familiar with and accept the obligation of my position as registered agent. Or, if this ty to reflect a change in the registered office address, I hereby confirm that the corpor writing of this change.	mance of my document is ration has
	October 21,	2003
If signing on beh	nalf of an entity:	
	(Typed or Printed Name) (Capacity)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314