P04000012059

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





400035109444

05/04/04--01039--020 **35.00





TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Latin Products Grupo Max Corp (Name of corporation)
DOCUMENT NUMBER: PO400012059
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this mafter to the following:
Feduro Wolff (Name of person)
datin no duty Guyo Max Coup (Name of Am/company)
B374 NW 2nd Tenace (Address)
Migni, El 33 182 (City/state and zip code)
For further information concerning this matter, please call:
James of person) at (305) 5464811 (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 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 60/.0502, 61/.0502, 60/.1508, or 61/.1508, Florida Statutes, this statement of	
change is submitted for a corporation organized under the laws of the State of	
to change its registered office or registered agent, or both, in the State of Florida.	. –
1. The name of the corporation: Latin Products brupo Max Corp.	
2. The principal office address: 15715 Fouth Pixie Highway Suite 233	
Mani, Fl 33 157	
3. The mailing address (if different): Same as above	
4. Date of incorporation/qualification: 19204 Document number: PO4000 12059	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Federico Wolf PS = -3	-
13374 NW 2nd Torray	÷
Mioni Fl. 33182	- T
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	<u>ر</u>
Fedures Wolff	
15715 Seuth Diwe Highway #233 (P.O. Box or personal mailbox NOT acceptable)	
Mani, F1 33157	
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.	
Frederick Wolff Dire (Sugnature of an officer of director) (Printed or typed name and title)	Jo
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.	
3/6/04	
(Signature of Registered Agent) (Dale) If signing on behalf of an entity:	-
is againg on commit of an entry.	
(Compile)	

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