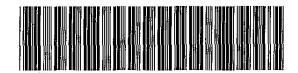
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: EGAM US CORPORATION (Name of corporation)
DOCUMENT NUMBER: PO 40000 18882
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:
CHERYL JEAN ECHEVERRIA (Name of person)
EGAM US CORPORATION (Name of firm/company)
(Name of firm/company)
1222 CHINADERLY DIZIVE
(Address)
(City/state and zip code)
For further information concerning this matter, please call:
(Name of person) at (959) 593 6634 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, 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,
the undersigned corporation organized under the laws of the State of FLORIDA
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation: <u>EGAM US CORPORATION</u>
REGISTERED PRINCIPAL OFFICE ADDRESS: 6020 NW 84 AVENUE, LIAMI FL 33160
2. The mailing address of the corporation: 1222 CHINABERRY DRIVE,
SAVANNA WESTON FL 33327
3. Date of incorporation/qualification: $\frac{\int AN}{26} \frac{1}{64}$ Document number: $\frac{PO400018882}{1}$
4. The name and address of the current registered agent and office:
CHERYL JEAN ECHEVERRIA 1222 CHINABERRY DRIVE SST &
1222 CHINABERRY DRIVE SSE &
SAVANNA WESTON FL 33327 TO IT IT
5. The name and address of the new registered agent (if changed) and/or registered office (ijchanged): (P. O. Box Not Acceptable)
• ALBERTO A ECHEVERRIA (VICE-PRESIDENT SECRETARY)
· New Principal Office Address:
1222 CHINABERRY DR., SAUANNA WESTON, FL 33327
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.
(Signature of an officer, chairman or vice chairman of the board) (Date)
(Signature of an officer, charman of vice charman of the board)
CHERYL J ECHEVERRIA (PRESIDENT)
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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
ALBERTO A ECHEVERRIA ESTA 26/04
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

CR2E045(9/00)

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