## P04000021194

(Re	equestor's Name)			
(Ac	ldress)			
(Ad	dress)	·		
(Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
r				

Office Use Only



900075992039

06/09/06--01023--016 \*\*385.00

06 JUN-9 PM 3: 29
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

morria

## **COVER LETTER**

Division of Corporations				
Pozo Architects P A				
SUBJECT: Pozo Architects, P.A (Name of Corpor	ration)			
POCKIMENT NUMBER P04000021194				
DOCUMENT NUMBER: P04000021194				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the	ne following:			
Eduardo A. Pozo				
(Name of Contact Person)				
/B! /O				
(Firm/Company)				
0000 0000 01 Dalas 0014 440				
9260 Sunset Drive, Suite 119 (Address)				
(Audicss)				
Miami, Florida 33144				
(City/State and Zi	Code)			
For further information concerning this matter, please call:				
To runner internation concerning this matter, preuse can				
Eduardo A. Pozo at	(305) 412-7360 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
F.,				
Mailing Address:	Street Address:			
Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

TO:

Amendment Section

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

statement of ch	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Sta tion organized under the laws of the State of Fl e or registered agent, or both, in the State of Flor	orida	
			- <i>:</i> аа.	
	the corporation: Pozo Archite	Drive, Suite 119, Miami, Florida 33173		
2. The principa	Torrice address: 0200 Ouriou	Divo, Gailo 110, Main, 11010a 60110	<del></del>	
3. The mailing	address (if different):			
4. Date of incom	rporation/qualification: 01/28/	2004 Document number: P0400002	21194	
	nd street address of the current reartment of State:	egistered agent and registered office on file with t	the SE SE	
	Eduardo A. Pozo		ECRET	
	8000 West Flagler Street, Suite 203			
	Miami, Flórida 33144		E P	
6. The name an (if changed):	<del>-</del>	stered agent (if changed) and /or registered office	ာတြယ္ ေ	
	Eduardo A. Pozo			
	9260 Sunset Drive, S			
	Miami, Florida 33173	OT acceptable)		
- 1	rese of its registered office and I be identical.	the street address of the business office of its r		
authorized by t	he board or the corporation ha	aly adopted by its board of directors or by an of as been notified in writing of the change.	11001 30	
(Signal	die of an officer or director)	Eduardo A. Pozo (Printed or typed name and title	<del>)</del>	
I hereby accept I further agree of my duties, an document is be	t he appointment as registered	d agent and agree to act in this capacity. of all statutes relative to the proper and compl ept the obligation of my position as registered a lange in the registered office address. I hereby		
	ignature of Registered Agent)	06/05/2006 (Date)	<u> </u>	
	chalf of an entity:	(Date)		
	To A Pos			
	(Typed or Printed Name)	<del></del>		

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