P040000 2500°

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



600031499076

04/01/04--01043--012 **35.00

03 HAR 31 PH 2: 52 SECRETARY OF STATE

RACIG

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: MidCoast Realty Acquisitions, Inc. (Name of corporation)				
(1 mine of conportation	9			
DOCUMENT NUMBER: P04000025009	<u>4.2</u>			
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	ing:			
Michele Mueller				
(Name of person)				
MidCoast Credit Corp.				
(Name of firm/company)				
1926 Tenth Avenue North, Suite 400				
(Address)				
Lake Worth, FL 33461				
(City/state and zip code)			
Tou fouther information concerning this matter plage cells	•			
For further information concerning this matter, please call:				
Michele Mueller at (561) 540-6224 x126 (Area code & daytime telephone number)			
(Name of person)	(Area code & daytime telephone number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:	Street Address:			
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations			
P.O. Box 6327	409 E. Gaines Street			
Tallahacsee FI 37314	Tallahassee FI, 32399			

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

	provisions of sections 607.0502, 617.0502, 607.1.		·
-	itted for a corporation organized under the laws o gistered office or registered agent, or both, in the		in order
io change is re	gisierea office or registerea agent, or som, in the	siale of Florida.	
1. The name of	the corporation: MidCoast Realty Acquisitions, I	inc.	
2. The principal	office address: 1926 Tenth Avenue North, Suite	400, Lake Worth, FL 33461	
			
3. The mailing a	address (if different):	·	
		<u>and the second of the second </u>	
4. Date of incor	poration/qualification: January 30, 2004 Do	ocument number; P0400025009	9
	d street address of the current registered agent and rtment of State:	registered office on file with the	
	Olga E. Parra		
	1926 Tenth Avenue North, Suite 400		
	Lake West El 22464		ES CS
	Lake Worth, FL 33461		長
6. The name and (if changed):	d street address of the new registered agent (if char	nged) and /or registered office	D3 MAR 31
	Michael Bernstein		REFE
	1926 Tenth Avenue North, Suite 400		STA 5: 5:
	(P.O. Box or personal mailbox NO	T acceptable)	一部。
	Lake Worth, FL 33461		
The street addre	ess of its registered office and the street address e identical.	of the business office of its regis	tered agent, as
Such change withe board, or th	as authorized by resolution duly adopted by its te corporation has been notified in writing of the	coard of directors or by an office change.	r so authorized by
mile	Par Binster	Michael Bernstein, President	- · · · · · · · · · · · · · · · · · · ·
()	Signature of an officer or director)	(Printed or typed name and	•
I hereby accept I further agree duties, and I an being filed men been notified in	t the appointment as registered agent and agree to comply with the provisions of all statutes rela n familiar with and accept the obligation of my p ely to reflect a change in the registered office ad a writing of this change.	to act in this capacity. tive to the proper and complete position as registered agent. Or, ldress, I hereby confirm that the	performance of my if this document is corporation has
milh	al Bomate	March 15, 2004	
	(Signature of Registered Agent)	(Date)	
If signing on be	chalf of an entity:		
	Control of the Contro	<u></u>	<u> </u>
	(Typed or Printed Name)	(Capacity)	

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