P0400039974

(Red	juestor's Name)	
(Add	lress)	
(Add	iress)	
(City	/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
	·	
(Bus	iness Entity Nam	e)
(Dec	ument Number)	
(000	ument Number)	
Certified Copies	Ce <u>r</u> tificates	of Status
Special Instructions to F	iling Officer:	
	·	

Office Use Only



300038309963

07/01/04--01009--007 **35.00

O4 JUL -1 PM 4: 06

PS 7/9/04
PA/NO

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: In 4 out BP Jul. (Name of corporation)
DOCUMENT NUMBER: 10 4 0000 39974
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:
The San Hannad (Name of person)
(Name of firm/company)
280/ 26 th St W/ (Address)
Bardufon, Fl 34205
(City/state and zip code)
For further information concerning this matter, please call:
Thean 1/amnal at 941 756 1167 (Name of person) (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 section			_		*_	
change is submitted for a corporate to change its registered office or re			· · · · · · · · · · · · · · · · · · ·	100 IV	in order	
		on, we will be the of a	L 0			
1. The name of the corporation:		to to	19 /s	PILL	· · · · · · · · · · · · · · · · · · ·	æ
2. The principal office address:	2801	26 54 5	tw			or Pulgar
	Bunda.	ton , F	2 3.42	.5	==================================	· <u> </u>
3. The mailing address (if different):		<u> </u>	, **- **-	<u>a</u>	- -
· · · · · · · · · · · · · · · · · · ·	·		 	11 4 Mg 2 1		, , ,= , ,= <u>,</u>
4. Date of incorporation/qualificati	on: $\frac{3}{3}/\varepsilon$	✓ Document	number:	04000	39974	,
5. The name and street address of t Florida Department of State:	•	agent and register	ed office on file	with the		
	Narhet	Nasx	<u>n</u>		e e e e e e e e e e e e e e e e e e e	1:=
·	5005 NI	w 58'	4 51		. 140	
	1			/ 12 /5		
	1. ampan	10 Mean	1 100	- 7 9.9 6.00	Giranes 	
6. The name and street address of t (if changed):	he new registered ag	ent (if changed) an	d/or registered	office	₽ m	
	Ilisa	N Ho	mac		D	
	4550 9	17/4 58	W	Apt P	13	- .
	(P.O. Box or persona	l mailbox NOT acceptabl	e)	/		
Bas	deston	FL	1205		ر السائد	
The street address of its registered changed will be identical.	d office and the stree	et address of the b	usiness office	of its registered a	gent, as	
Such change was authorized by rethe board, or the corporation has	esolution duly adopt been notified in writ	ed by its board of	directors or by	an officer so au	thorized by	
111 VI			_	- //		
Signature of an officer or	director)	<u></u>	Printed or I	yped name and title)		- 155
I hereby accept the appointment of further agree to comply with the duties, and I am familiar with and being filed merely to reflect a chabeen notified in writing of this ch	as registered agent c e provisions of all st d accept the obligati inge in the registere ange.	and agree to act in atutes relative to t on of my position d office address, I	this capacity. he proper and as registered a hereby confiri	complete perfort agent. Or, if this in that the corpor	nance of my document is ation has	
IHA Gano		•	61	29/04		
(Signature of Registered	Agent)			(Date)		
If signing on behalf of an entity:						
. (Typed or Printed Nam	20)			(Capacity)		
. (Typed of cruited Nati	u. j			(mathemeth)		

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