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Law Offices of JOHN M. BERNAZZOLI

2734 Polk Street, Suite H Hollywood, Florida 33020 Telephone: (954) 923-9700 Facsimile: (954) 923-8402

June 17, 2004

Division of Corporation P O Box 6327 Tallahassee, FL 32314

Re: Blue Ribbon Retirement Residence, Inc.

Dear Sirs:

Enclosed you will find an original and a copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations. Also enclosed is a check in the amount of \$35.00 for the filing fee.

Could you please make the change and return the stamped copy in the enclosed self addressed stamped envelope.

If you have any questions, please contact me.

ry respectfully yours,

Pinho

JMB:nbs Enclosures

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

Pursuant to the provisions of section 607.0502 or 607.1508, 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 is: -	Blue 1	Ribbon	Retirement	Residence,	Inc.
1a Date of incorporation August	15 10	991		mber P94000	 060778
1a. Date of incorporation August		J J &	_Document nu	mbe <u>r 194000</u>	
2. The name and address of the cu	rent reg	istered a	gent and office	: AL P	
Stella Bondos, 2101 North	16th 2	Avenue	, Hollywood	, FI 33020	
3. The name and address of the new (P.O. Box Not Acceptable	-)	_		ASSEE.	
Stella Bondos, 1537 Shena	ndoah (Street,	, Hollimood		
The street address of its registered a of its registered agent as changed, w	ill be ide	ntical.			
Such change was authorized by resc an officer so authorized by the board	•		0 1		r by
	SIGNATURE Stell Bonds				
(name and title)					
	DATE	Stell	la Bondos,	President	
HAVING BEEN NAMED AS REGISTE PROCESS FOR THE ABOVE STATE! IN THIS CERTIFICATE, I HEREBY AC AGENT AND AGREE TO ACT IN THI WITH THE PROVISIONS OF ALL STAPLETE PERFORMANCE OF MY DUT THE OBLIGATION OF MY POSITION	O CORPO CCEPT T S CAPAC ATUTES TES, AN	ORATION HE APPO CITY. I F RELATIN D I AM F	N AT THE PLA OINTMENT AS FURTHER AGR /E TO THE PRO AMILIAR WITH D AGENT,	CE DESIGNAT REGISTERED EE TO COMPL OPER AND CO I AND ACCEPT) _Y)M-
	DATE _	June	7, 2004		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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