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- DATURA ENTERPRISES, INC.		

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DATURA ENTERPRISES, INC. P.O. BOX 252 HASTINGS, FL 32145				
(Cit	ty/State/Zip/Phone	e#)	· · · · · ·	
PICK-UP		MAIL		
(Bu	siness Entity Nan	ne)		
(Dc	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	Office Use On		1	

FILED 04 DEC -3 PM 2: 20 SECRETARY OF STATE TALLAHASSEE. FLORIDA



T BROWN DEC - 8 2004

## STÂTEMÊNT OF CHANCE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

- 1. The name of the corporation: DATURA ENTERPRISES INC.
- 2. The principal office address: 120 BILBAO DR \_\_\_\_\_\_\_ST AUGUSTINE F2 32086

3. The mailing address (if different):\_

- 4. Date of incorporation/qualification: APRIL 26, 2004 Document number: P04000068182
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BUSINESS FILINES INCOEPORATED	-
660 EAST JEFFERSON ST	The of
TALLAHASSEE FL 32301	E E E
and street address of the new registered agent (if changed) and /or registered off	

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

KEX BKNORR BILBAO DR (P.O. BOX NOT acceptable) ST AUGUSTINE FL 32086

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, or the corporation has been notified in writing of the change.

REX B KNORR PR non PRES gnature of an officer or director)

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 registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

LLS (Man)

11-26-04 (Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314