

P04000091448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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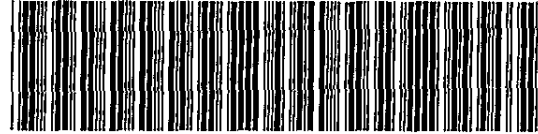
(Business Entity Name)

(Document Number)

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*PA. Charge*

C. Coulllette MAR 24 2005

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** M.R.L. INTERNATIONAL SERVICES CORP.  
(Name of corporation)

**DOCUMENT NUMBER:** PO4000091448

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:

MILAGROS VINCES  
(Name of contact person)

M.R.L. INTERNATIONAL SERVICES CORP.  
(Firm/Company)

1115 FAIRLAKE TRACE APART 2206  
(Address)

WESTON, FL 33331  
(City/state and zip code)

For further information concerning this matter, please call:

MILAGROS VINCES at (954) 649 9113  
(Name of contact 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 sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: M.R.L. INTERNATIONAL SERVICES CORP.  
2. The principal office address: 1115 FAIRLAKE TRACE  
APART 2206 WESTON, FL 33326  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: JUNE 14, 04 Document number: P04000091448  
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

MILAGROS VINCES  
1115 FAIRLAKE TRACE APART 2206  
WESTON, FL 33326

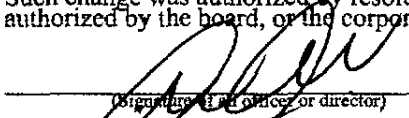
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

4474 WESTON RD. # 120  
DAVIE, FL 33331  
(P.O. Box NOT acceptable)

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TALLAHASSEE, FL 32314

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.

  
\_\_\_\_\_  
(Signature of officer or director)

MILAGROS VINCES (PRESIDENT)  
\_\_\_\_\_  
(Printed or typed name and title)

*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.*

\_\_\_\_\_  
(Signature of Registered Agent)

March 14th 2005  
\_\_\_\_\_  
(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