## P04000095754

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## TRANSMITTAL LETTER

SUBJECT: PEE GEE BEE INC. (Name of Corporation)
•
DOCUMENT NUMBER: P04000095754
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
MELWYN KESSLER (Name of Person)
(Name of Person)
PEE GEE BEE INC.
PEE GEE BEE INC. (Name of Firm/Company)
1085 E. 14th ST. (Address)
(Madress)
HIALEAH, FL 33010
(City/State and Zip Code)
For further information concerning this matter, please call:
MELVYN KESSLER at ( 305- ) 887-0380 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Discisson is a check for 400,00 made payable to the 1 vertain 2 operation of black
Mailing Address: Street Address:
Amendment Section Amendment Section
Division of Corporations P.O. Box 6327  Division of Corporations 409 E. Gaines Street
Tallahassee, FL 32314 Tallahassee, FL 32399

TO: Amendment Section Division of Corporations

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

statement of char	rovisions of sectio age is submitted fo to change its regi	r a corporation o	organized und	der the laws	of the State o	f Florid		_
1. The name of th	ne corporation:	PEE GEE B	EE, INC.					
2. The principal of	-	1085 E. 1	4th St.					
		Hialeah,F	L 33010					
3. The mailing ac	ldress (if different)	<b>:</b>						
4. Date of incorp	oration/qualification	on: 6/23/0	4 D	ocument nu	mber: P04	000095754		
5. The name and Florida Depart	street address of the ment of State:	ne current registe	red agent and	l registered	office on file	with the	9	
	DAN SILVER	BERG				A	3 3	-
	425 E. 10t	h COURT				HAS	<del>20</del>	}
	HIALEAH, F	L 33010				Y OF	<u>A</u>	m
6. The name and (if changed):	street address of th	ne new registered	agent (if cha	inged) and /	or registered	STATE LORIDA	9.	O
	MELVYN KES	SLER	<u> </u>	<u></u>				
	1085 E. 14							_
		(P.O. Box NOT acco	ptable)					
	HIALEAH, F	L 33010				_ <del>_</del>		
The sticet address as changed will	ss of its registered be identical.	office and the s	treet address	of the busi	ness office o	f its registere	d age	nt,
Sulfil change was authorized by the	s authorized by re e board, or the co	solution duly ad rporation has be	opted by its en notified i	board of di n writing of	rectors or by the change.	an officer so		
Signatur	e of an officer or director	·- ir)	ME	VYN KES	SI.E.R. d or typed name a	and title)		<del>-</del> -
I hereby accept if I further agree to of my duties, fanc document is bein couperation has	the appointment a comply with the I I am familiar wi ag filed merely to been notified in w	s registered age provisions of al ih and accept the reflect a change writing of this cha	nt and agree l statutes rel e obligation in the regist ange.	to act in th ative to the of my positi ered office	nis capacity, proper and c ion as registe address, I he	complete perf ered agent. ( reby confirm	orma Ir, if t that t	nce his he
MA	nature of Registered Age	ent)	10	01/0	(Date)			_
If signing on bel		·············		•	(2000)			
(T;	yped or Printed Name)					7.2	.*	