Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000300766 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC

Account Number : I20060000012 Phone 🕖 : (305)826-5886

Fax Number

: (305)722-0535



REGISTERED AGENT CHANGE

L.A INTERNATIONAL BUSINESS CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

	provisions of sections 607,0502, 617.050 unge is submitted for a corporation organ		
in arde	er to change its registered office or registe	ered agent, or both, in the State of Fla	
1. The name of	the corporation: L.A INTERNATIONAL B	USINESS CORP.	# 2 2 C
2. The principal DORAL, FL	office address: 5521 NW 112 AVE # 106	<u> </u>	Mar B
			5 5 S
3. The mailing a	address (if different):		
4. Date of incom	poration/qualification: 06/30/2004	Document number: P0400009	9127
	d street address of the current registered a rtment of State:	gent and registered office on file with	the
	MARTHA E ATHANASSOPOUL	os	
	15940 NW 83 AVENUE		
	MIAMI LAKES, FL 33016		
6. The name and (if changed):	street address of the new registered ager	_	;
	5521 NW 112 AVE # 106		
	(P.O Box NOT acceptable) DORAL, FL 33178		
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its r	egistered agent,
Such change we authorized by the	as authorized by resolution duly adopted to board, or the corporation has been no	hy its board of directors or by an of diffied in writing of the change.	ficer so
X (Signate	land of through	LUIS C AYALA (VP) 21/26	CV 02
I hereby accept I further agree to of my duties, an document is bein comporation has	the appointment as registered agent am to comply with the provisions of all state of I am familial with and accept the obli- ng filed merely to reflect a change in the heen nonfied in writing of this change.	d agree to uct in this capacity, utes relative to the proper and compl gation of my position as registered of e registered office address, I hereby	cte performance gent. Or, if this confirm that the
(V)	South of Registered Agent)	' 12/21/2006 (Date)	
If signing on be	half of an entity:	·	
1019	ypad or Primed Names		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)