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COVER LETTER

TO: Amendment Section Division of Corporations

Super Arenn USA (Name of corporation) SUBJECT:

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:

Oren Winer (Name of contact person)

Super Arean USA (Firm/Company)

5973 S. MAINELSI (DF (Address)



For further information concerning this matter, please call:

Oren Winev at (<u>959</u>) 680 - 7/44/ (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>Possian Zohar</u>, hereby resign as <u>Porsi Lint</u> (Title) of <u>Super Arena USA INC</u>, (Name of Corporation)

<u>Po4000116884</u>, a corporation organized under the laws of the State of (Document Number, if known)

(Signature of resigning officer/director)

FILING FEE IS \$35.00



Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314