P04000120220

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Pa Change

MOV 1 3 2009

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT:	Miaventure		
	Name of Corp	oration	
DOCUMENT NUMBER: P04000120220			
The enclosed Statement of Change of	of Registered Office/A	gent and fee are submi	tted for filing.
Please return all correspondence cor	ncerning this matter to	the following:	
	Yair Szlaifer-	Shalev	
	Name of Contac	et Person	
	Miavento	ıre	
	Firm/Comp		
		•	
	2028 Harrison Stre		
,	· Address	S	
, T. '.			
· · · · · · · · · · · · · · · · · · ·	Hollywood, Fl City/State and 2	L 33020	
	City/State and 2	Zip Code	
	yair@miaventu	ure.com	
E-mail address	: (to be used for futu	ire annual report noti	fication)
For further information concerning	this matter, please call	:	
Yair Szlaifer-Sh		at (954)	926-5644
Name of Contact Pe	rson	Area Code & Dayt	ime Telephone Number
Enclosed is a \$35.00 check made pa	yable to the Departme	ent of State.	
Mailing Ad Amendme	Idress: nt Section	Street Address Amendment S	
	of Corporations	Division of C	
P.O. Box	•	Clifton Build	•
Tallahasse	ee, FL 32314	2661 Executiv Tallahassee, I	ve Center Circle FL 32301

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

statement of cha	nge is submitted for a c	orporation organize	607.1508, or 617.1508, Flood ander the laws of the Sta dagent, or both, in the Sta	_{ite of} Florida
	the corporation: MIA		-	ic of Frontia.
2. The principal	office address: 2028 I	Harrison Street S	Suite 106, Hollywood,	FL 33020
3. The mailing a	ddress (if different): 20	028 Harrison Str	eet Suite 106, Hollyw	ood, FL 33020
4. Date of incorp	poration/qualification: _	08/19/2004	Document number:	P04000120220
	I street address of the cutment of State: (If resig		nt and registered office on	file with the
	3131 NE 188TH S	T, 2-601 AVEN	ITURA, FL 33180	
) property (
6. The name and (if changed):			if changed) and /or register	1AR)
·		P.O Box NOT ac	cceptable	AM IO: L.)
The street addre	ess of its registered offi be identical.	ce and the street ad	dress of the business offic	e of its registered agent,
Such change wa authorized by th	as authorized by resolune board, or the corpora	tion duly adopted bation has been notif	y its board of directors or led in writing of the chang	by an officer so
Signatur	re of amothicer or director	<u> </u>	YNR SZLOW Printed or typed nan	Fu susta - P
	//	gistered agent and o visions of all statute ud accept the obliga ct a change in the r ng of this change.	agree to act in this capaci s relative to the proper ar tion of my position as reg egistered office address, i	ty. id complete performance istered agent. Or, if this hereby confirm that the
If signing on be	nature of Refistered Agent half of an entity:	<u> </u>	Date	
Ty	yped or Printed Name			

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