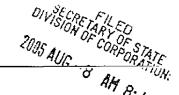
05000006713



(Re	questor's Name)	
(Address)		
(Address)		
(City	y/State/Zip/Phone	<i>⇒#</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
		

Office Use Only



200058326522

08/08/05--01007--003 **35.00

RAChg.
18,

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Omplete Destaurant Services (Name of corporation)		
DOCUMENT NUMBER: 0500006713		
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:		
Jose W. Hernandez		
Complete Destavant Services		
10773 NW 58th Street # acy		
Wiami, Fla. 33178 (City/state and zip code)		
For further information concerning this matter, please call:		
Tope N. Hernandez at (305) 796-7341 (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: Complete Restaurant Services, Corp
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 1 12 8005 Document number: P0500006713
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Eric Bivera
3881 5W 35th Avenue
Niami, Fla. 33133
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
16671 NW 87 Court (P.O. Box NOT acceptable) Planni Laves Fla. 33018
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 an officer or director) Eric Diverging President (Printed or typed name and title)
l 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 socument 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.
(Signatuse of Registered Agent) If signing on behalf of an entity:
Tose V. Hernandez

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