P05000011793

(Re	equestor's Name)	
(Ac	ddress)	
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		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	v



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FILED 05 JUN 29 PM 1:50 SECRETARY OF STATE TALLAHASSEE, FLORIDA

R.A. change

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COVER LETTER

Amendment Section Division of Corporations TO:

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SUBJECT: DOC ALLAN PUBLISHING CO. INC. (Name of corporation)
(Name of corporation)
DOCUMENT NUMBER:
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:
ALLAN GITTMAN (Name of contact person)
DOC ALLAN PUBLISHING CO. INC. (Firm/Company)
(Firm/Company)
3773 N. FEDERAL HIGHWAY SUITE 100 (Address)
POMPANO BEACH FL. 33064 (City/state and zip code)
For further information concerning this matter, please call:
<u>AULAN GITTMAN</u> (Name of contact person) at (<u>954</u> , 296-2241 (Area code & daytime telephone number)
(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

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CR2E045(6/04)

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

1. The name of the corporation: DOC ALLAN PUBLISHING COMPANY	ļÌ
1. The name of the corporation: DOC ALLAN PUBLISHING COMPANY 2. The principal office address: 3773 N. FEDERAL HIGHWAY SUITE POMPAND BEACH. FL. 33064	ļ
3. The mailing address (if different):	
4. Date of incorporation/qualification: <u>JAN, 19, 2005</u> Document number: <u>P05000011793</u>	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: <u>AUUAN GITTMAN</u> <u>3773 N. FEDERAL HIGHWAY</u> SUITE100 <u>POMPANO BEACH, FL. 33064</u> <u>E</u>	E F
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): <u>JESSICA LEON</u> <u>3773 N. FEOERAL HIEHWAY</u> 5417 (P.O. BOX NOT acceptable) <u>POMPANO BEACH FL. 33067</u>	ILL SAN

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.

ignature of an officer or director)

(Printed or Typed name and title)

-PAESIDE.

I 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 document 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.

(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314