## P05000025020

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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT , MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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B.A. Change

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJE	ECT: 950 75th CORPORATION (Name of Corp	oration)	
DOCU	MENT NUMBER: P05000025020	<u>.</u> .	
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:	
	SANDY CANDY CANDY CANDY CANDY CANDY CANDY CANDA	<u>ALAMAI</u>	
	(Name of Conta	ct Person)	
	AZRIA LAW (Firm/Com	FIRM, P.A.	
	(Firm/Com)	pany)	
407 LINCOLN ROAD, SUITE 8-L			
	(Addres	s)	
	MIAMI BEAC	CH, FL 33139	
For Tur	ther information concerning this matter, please call		
	SANDY CALAMAI (Name of Contact Person)	at ( <u>305</u> ) <u>532-7350</u> (Area Code & Daytime Telephone Number)	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclos	sed is a \$35.00 check made payable to the Departmo	ent of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## 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: 950 75th CORPORATION
2. The principal office address: 950 NE 75th STREET
MIAMI, FL 33138
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/16/2005 Document number: P05000025020
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
ISABELLE E. AZRIA ESQ.
AZRIA LAW FIRM, P.A.  420 Lincoln Road, Suite # 235-B, Miami Beach, FL 33139
420 Lincoln Road, Suite # 235-B, Miami Beach, FL 33139  6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  ISABELLE E. AZRIA, ESQ.
ISABELLE E. AZRIA, ESQ.
AZRIA LAW FIRM, P.A.  (P.O. Box NOT acceptable)
407 LINCOLN ROAD, SUITE 8-L, MIAMI BEACH, FL 33139
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)  CHARLY NESTOR - Director (Printed or typed name and title)
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) 12 29 08
If signing on behalf of an entity:
ISABELLE AZRIA
(Typed or Printed Name)

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