## P0500046462

(Requestor's Name)
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(Address)
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## **COVER LETTER**

TO: Registration Section Division of Corporations	2005 OCT 13 AM 10: 19
SUBJECT: Daniel V. Los Santos, P.A.	TALLAHASSEE FLORIDA
(Name of Alien Business Organization)	IALLAHASSEE FLORIDA
Dear Sir or Madam:	
The enclosed Statement of Change of Registered Agent/Registered Office for Alien I fee(s) are submitted for filing.	Business Organization and
Please return all correspondence concerning this matter to the following:	
Daniel V. Los Santos	· <b>z</b> · · ·
(Name of Person)	
Daniel V. Los Santos, P.A.	
(Firm/Company)	
11336 Minaret Dr.	
(Address)	. ş
Tampa, FL 33626 – (City/State and Zip Code)	
(O.C.), Date and E.p 2005)	
For further information concerning this matter, please call:	
Daniel V. Los Santos at ( 813 ) 600-3772	
Daniel V. Los Santos at (813) 600-3772  (Name of Person) (Area Code & Daytime Telephone Nur	nber)
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	en e
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301	
Enclosed is a check for the following amount:	
☑ \$35.00 Filing Fee	rtified Copy

INHS23 (08/05)

## STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

1. Daniel V.	Los Santos, P.A				
		(Name of alien business organ	nization)		
2. 03/28/200		3. P05000046462	4, <u>none</u>		
(Flor	ida registration date)	(Florida document nur	nber)	(FEI Number, if applic	able)
5. 11336 M	inaret Dr., Tampa			<u> </u>	
		(Principal office addres	ss)		
6. Name and	address of registere	d agent and office currently	on record with	this office:	
	Spiegel & Utren	a, P.A.		_	
	1840 SW 22nd	St.		TALL	2005 OCT 13 AM 10:
	Miami, FL 33145	5		A	CT -
7. New regis	tered agent and/or o	ffice address:		SSEE	3
	Daniel V. Los S	Santos		FLO	9
	11336 Minaret E	Or.		ATE RIDA	19
	Tampa, FL 336	626			
	(Note	: Registered office must be a Flor	ida street address)	)	**
registered 9. Such char	agent are identical.	tered office and the street ad by the board of directors or rectors.			
10.	<u>avil</u>	mature of chairman, vice chairma	in, or officer)		
11. Presid	ent (Na	me and capacity of person signing	g in number 10 ab	ove)	
I hereby		ngent, if applicable: ment as registered agent. I a 1505, Florida Statutes.		th and accept the	
	Venictored agent accenti	mr manatatananti 🔾		0.001 11, 2000	

FILING FEE: \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314