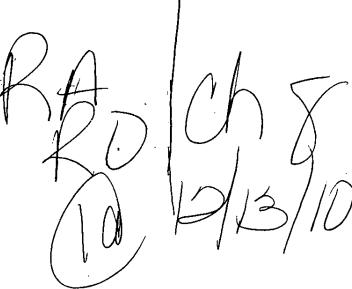
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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COVER LETTER

Division of Co	rporations		· · · · · · · · · · · · · · · · · · ·
SUBJECT:	HAWAS ENTER!	PRISES, INC.	
	Name of C	Corporation	
DOCUMENT NUMB	er: P05	000090011	
The enclosed Statemen	t of Change of Registered Offic	ce/Agent and fee are submitted	d for filing.
Please return all corres	pondence concerning this matte	er to the following:	
	AHMAD A	A. HAWAS	
	rance of Ce	mact i cison	
	Firm/C	ompany	<u></u>
		RAL HIGHWAY	
	Ado	dress	
	BOCA RATON, City/State a	FLORIDA 33431 and Zip Code	
E-r	nail address: (to be used for	future annual report notifica	ation)
For further information	concerning this matter, please	call:	
AHM	AD A. HAWAS	at (772)	696-5000
Name o	f Contact Person	at (772) Area Code & Daytime	Telephone Number
Enclosed is a \$35.00 cl	neck made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corportification Building 2661 Executive Control Tallahassee, FL 3	orations Center Circle

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

statement of ch	e provisions of sections 607.0502, 617.0502, 6 vange is submitted for a corporation organized ler to change its registered office or registered	under the laws of the State of	of FLORIDA
	the corporation: HAWAS ENTERPR		
2. The principal	office address: 3401 N FEDERAL HIGI	HWAY	
BOCA RA	ATON, FLORIDA 33431		<u>,. —— </u>
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: JUNE 23, 2005	Document number:	P05000090011
	nd street address of the current registered agent artment of State: (If resigned, enter resigned)	and registered office on file	with the
	AHMAD A. HAWAS		
	3401 N FEDERAL HIGHWAY		<u> </u>
	BOCA RATON, FLORIDA 33431		
6. The name and (if changed):	d street address of the new registered agent (if	changed) and /or registered	SERVETA
	ALI ALZAMANI		6
	3401 N FEDERAL HIGHWAY		
	P.O. Box NOT acce	ptable	
	BOCA RATON, FLORIDA 33431		_ 5
The street address changed will	ress of its registered office and the street addr I be identical.	ress of the business office o	f its registered agent,
Such change wanthorized by the	vas authorized by resolution duly adopted by the board, or the corporation has been notified	its board of directors or by d in writing of the change.	an officer so
_	4	ALI ALZAMANI	, PRES
I hereby accept	t the appointment as registered agent and ag to comply with the provisions of all statutes nd I am familiar with and accept the obligati ing filed merely to reflect a change in the reg s been notified in writing of this change.	Printed or typed name an tree to act in this capacity, relative to the proper and control of my position as registe gistered office address, I he	
		12.1.10	
Gig	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
Т	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 CR2E045 (8/05)