P05000127330

(Re	equestor's Name)	
(Ac	ddress)	
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
		ļ

Office Use Only



700109705677

09/21/07--01034--003 **35.00

OT SEP 21 AM 8: 50
SECRETARY OF STATE

COVERLETTER

TO: Amendment Section Division of Corporations
SUBJECT: FRANTASTIC SALES INC (Name of Corporation)
DOCUMENT NUMBER: POSO00 1~7330
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:
THOMAS MUSCATEUS -(Name of Contact Person)
FRINTAGTIC SALES INC. (Firm/Company)
1550 FEDERN HWY SUTE 14 (Address)
Boynton Benesia Fl. 33735- 1810 (City/State and Zip Code) For further information concerning this matter, places call:
For further information concerning this matter, please call:
THOMAS MUSCATEUS at (M) 73v - 6590 (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 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FRWTASTE SALES WC
2. The principal office address: 1550 N FEDERN HWY BOYNED BENCH FOR FOR SYST
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/11/201 Document number: 12/000 12/330
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
FRANCES MUSCATERIO
PRINCES MUSCITEUS IVID SOU GLASTON BERLY AND SERVE OF THE TOTAL ST. LUCIE FL 34513 THE TI
PONT ST LUCIE R 34513 REPORT
6. The name and street address of the new registered agent (if changed) and /or registered agent (if changed):
THEM AT MUSCATELLO TO CO
(P.O. Box NOT acceptable) Doyntal BEACH R 33431
BOYNIAN BEACH BE 33435
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.
Sphature of an officer or director) FRINCES MUSCLERUS (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.
Wignatury of Registered Agent) 8/26/07 (Date)
If signing on behalf of an entity:
THOMAS HUSCURELLO

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