Po5000/65023

(Requestor's Name)		
(Address)		
· (Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		





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Rivera, Maribel

From:

Karenakers [karenakers10@yahoo.com] Friday, April 15, 2011 2:11 PM CorpAddressChange Akers consulting doc mum p05000165023

Sent:

To:

Subject:

Please change the address to 3725 nw 5th ave boca raton, fl 33431. Thank you,

Karen Akers 561-212-6563