

POS000166458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

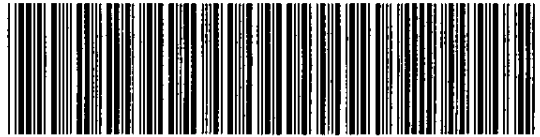
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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[Signature]

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** P&M DESIGN ENTERPRISES INC  
Name of Corporation

**DOCUMENT NUMBER:** P05000166458

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:

BORIS NIKHMAN  
Name of Contact Person

RELIABLE ACCOUNTING SERVICES INC  
Firm/Company

2903 OCEAN AVENUE  
Address

BROOKLYN, NY 11235  
City/State and Zip Code

NIKHMAN@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LIUDMILA ALEKSEEVA at ( 718 ) 769-5760  
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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: P&M DESIGN ENTERPRISES INC
2. The principal office address: 1200 RIO VISTA BLVD, #108  
PALM BEACH GARDENS, FL 33410
3. The mailing address (if different): 2903 OCEAN AVENUE  
BROOKLYN, NY 11235
4. Date of incorporation/qualification: 12/23/2005 Document number: P05000166458
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)

LIUDMILA ALEKSEEVA

1200 RIO VISTA BLVD, #108

PALM BEACH GARDENS, FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LIUDMILA ALEKSEEVA

3750 CENTRAL AVE, #110

P.O. Box NOT acceptable

FORT MYERS, FL 33901

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

LIUDMILA ALEKSEEVA, PRESIDENT

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

10/19/2009

Date

If signing on behalf of an entity:

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)

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TALLAHASSEE, FLORIDA