

P06 000000392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

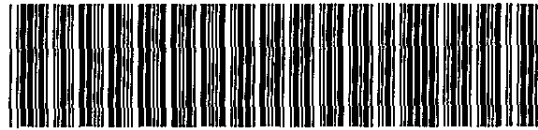
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R.A.
Change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FOB DIRECT IMPORT
(Name of Corporation)

DOCUMENT NUMBER: 106000000372

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:

JORGE A. AGUILERA
(Name of Contact Person)

FOB DIRECT IMPORT
(Firm/Company)

3233 NE 34th Street #1605
(Address)

FORT LAUDERDALE, FL 33308
(City/State and Zip Code)

For further information concerning this matter, please call:

Jorge Aguilera at (954) 630 0270
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2006

JORGE A. AQUILERA
FOB DIRECTIMPORT INC.
P.O. BOX 480040
FT. LAUDERDALE, FL 33348

SUBJECT: FOB DIRECTIMPORT INC.
Ref. Number: P06000000392

We have received your document for FOB DIRECTIMPORT INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Alan Crum
Document Specialist

Letter Number: 206A00010292

Thank You

**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: FOB DIRECT IMPORT
2. The principal office address: 3233 NE 34th St #1605
Fort Lauderdale, FL 33308
3. The mailing address (if different): PO Box 480040
Fort Lauderdale, FL 33348
4. Date of incorporation/qualification: 1/13/06 Document number: 906000000392
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

JORGE A AGUILERA
3233 NE 34th St #1605
Fort Lauderdale, FL 33308

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

RICHARD N SCHOEN
3233 NE 34th St #1605
(P.O. Box NOT acceptable)
Fort Lauderdale, FL 33308

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DIVISION OF STATE

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.

Jorge A Aguilera
(Signature of an officer or director)

JORGE A. Aguilera, 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.

Richard N. Schoen
(Signature of Registered Agent)

2/27/06
(Date)

If signing on behalf of an entity:

RICHARD N SCHOEN
(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