

P06000007422

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (950)205-0380

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

REGISTERED AGENT CHANGE

QUALITY FAST PLASTERING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED

06 MAR 20 AM 8:00

DIVISION OF CORPORATIONS

SECRETARY OF STATE
TELEPHONE 904-488-7100

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C. Coulllette MAR 21 2006

**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: QUALITY FAST PLASTERING, INC.
2. The principal office address: 10510 SW 200TH STREET
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/18/06 Document number: P0600007422
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LOURDES SANCHEZ

10510 SW 200TH STREET

MIAMI, FLORIDA 33157

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

JOSE M. GARCIA

10510 SW 200TH STREET

(P.O. Box NOT acceptable)

MIAMI, FLORIDA 33157

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]
(Signature of an officer or director)

Louderes Sanchez
(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]
(Signature of Registered Agent)

03/20/06

(Date)

If signing on behalf of an entity:

Jose Manuel Garcia
(Typed or Printed Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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