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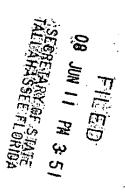
(Requestor's Name)			
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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: JUNGLE RESTAURANT AND PIZZERIA INC. (Name of Corporation)				
DOCUMENT NUMBER: P06000041265				
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:				
NESTOR C. PEREZ VEITIA (Name of Contact Person)				
JUNGLE RESTAURANT AND PIZZERIA INC. (Firm/Company)				
2220 NW 7TH STREET (Address)				
MIAMI, FL 33125 (City/State and Zip Code)				
For further information concerning this matter, please call:				
NESTOR C. PEREZ (Name	Z VEITIA at (305) 642- 3000 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

		7.0502, 607,1508, or 617.1508, Florida St organized under the laws of the State of <u>F</u>		
in orde	er to change its registered office or i	registered agent, or both, in the State of Fl	orida.	
1. The name of	the corporation: JUNGLE RESTAU	RANT AND PIZZERIA INC.		
2. The principal	office address: 2220 NW 7TH STR	EET ,		
	MIAMI, FL 33125	<u>;</u>		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: MARCH 2	2,2006 Document number: P060000	41265	
	d street address of the current registertment of State:	ered agent and registered office on file with	h the	
	GALIA PUPO			
	10847 NW 7 STREET			
	MIAMI, FL 33172			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	NESTOR C. PEREZ VEIT	IA		
	9143 SW 227 STREET U	NIT 3		
	(P.O. Box NOT acc	reptable)	SIA ORIA	
	MIAMI, FL 33190		2	
=		street address of the business office of its		
Such change w authorized by t	as authorized by resolution duly as he board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so	
(Signat	ure of a difficer or director)	NESTOR C. PEREZ VEITI. (Printed or typed name and ti		
I further agree of my duties, ar document is be	the appointment as registered age to comply with the provisions of a nd I am familiar with and accept th ing filed merely to reflect a change s been hotified in writing of this ch	ent and agree to act in this capacity. Il statutes relative to the proper and com he obligation of my position as registered e in the registered office address, I hereb hange.	plete performance l agent. Or, if this y confirm that the	
\mathcal{U}	<i>₹/</i> 2/	06/05/08		
(Si	guature of Registered Agent)	(Date)		
If signing on be	ehalf of an entity:			
(Typed or Printed Name)			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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