## P04000053969

(Re	equestor's Name)	_
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
•	-	
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Special Instructions to	Filing Officer:	:
		-

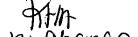




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10/31/06--01044 - 001 \*\*35.00





## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	SJECT: KITCHEN EUROGALLERY INC (Name of Corporation)	
DOCU	CUMENT NUMBER: P06000053969	
The en	enclosed Statement of Change of Registered Office/Agent and fe	e are submitted for filing.
Please	se return all correspondence concerning this matter to the follow	ng:
	MARIAN MISIOROWSKI (Name of Contact Person)	
	KITCHEN EUROGALLERY INC (Firm/Company)	
	4551 NE 6TH AVE (Address)	
	OAKLAND PARK, FL 33334 (City/State and Zip Code)	
For fur	further information concerning this matter, please call:	
AGNE	NES POLOM at ( 561 (Area C	) 210-7998 Code & Daytime Telephone Number)
Enclos	losed is a \$35.00 check made payable to the Department of State.	
	Amendment Section Am Division of Corporations Div P.O. Box 6327 Cli Tallahassee, FL 32314 266	eet Address: endment Section rision of Corporations fton Building 1 Executive Center Circle lahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA rockhange its registered office or registered agent, or both, in the State of Florida.
	he corporation: KITCHEN EUROGALLERY INC
	office address: 4551 NE 6TH AVE, OAKLAND PARK, FL 33334
3. The mailing ac	ddress (if different): SAME AS ABOVE
4. Date of incorp	poration/qualification: 04/14/2006 Document number: P06000053969
	street address of the current registered agent and registered office on file with the tment of State:
	ARBOR OAK CIR # 303
	BOCA RATON, FL 33428
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	4551 NE 6TH AVE, OAKLAND PARK, FL 33334
	(P.O. Box NOT acceptable)
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
	Glorows MARIAN MISIOROWSKI - PRESIDENT (Printed or typed name and title)
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Misto	
	(Cara)
	half of an entity:
MARIAN	yped or Printed Name)

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