

PO6000103412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

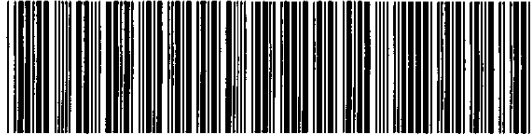
(Document Number)

Certified Copies _____

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TALLAHASSEE, FLORIDA

R.A. Change

TB

6/11/08

COVER LETTER

TO: Amendment Section
Division of Corporations

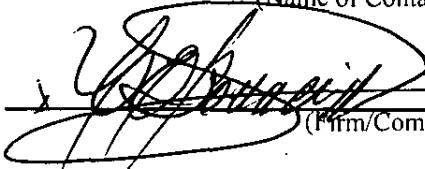
SUBJECT: MOMENTOS U.S.A. INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 6000103412

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:

Carlos Bonacía
(Name of Contact Person)


(Firm/Company)

9981 N. Belknap Circle
(Address)

MARGATE, FL 33063
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos Bonacía at (786) 262-8167
(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

May 27, 2008

CARLOS E BONACIA
9981 N. BELFORT CIRCLE D2
TAMARAC, FL 33321

SUBJECT: MOMENTOS USA, INC
Ref. Number: P06000103412

We have received your document for MOMENTOS USA, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 808A00032935

RECEIVED
2008 JUN 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: MOMENTOS USA, INC.
2. The principal office address: 9981 N. Belford Circle
TAMARAC, FL 33321
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 8/8/2006 Document number: P06000103412
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

INCOME TAX & ACCOUNTANT EXPRESS, INC.
101 N. STATE RD 7
MARGATE, FL 33063

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

JAMES SOTO
1876 N. UNIVERSITY DR.
(P.O. Box NOT acceptable)
PLANTATION - FL 33313

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TALLAHASSEE, FLORIDA

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)

Carlos BONACIA - Presidente.
(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)

05/01/2008
(Date)

If signing on behalf of an entity:

JAMES SOTO
(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