## P07000003172

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
. (Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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## **COVER LETTER**

TO:	TO: Amendment Section Division of Corporations			
SUBJECT: Dragonre., Inc.,  (Name of Corporation)				
DOCU	UMENT NUMBER: P07000003172	<del></del>		
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:				
	Mohamad Elzein	·		
(Name of Contact Person)				
Dragonre., Inc., (Firm/Company)				
(Firm/Company)				
2699 Stirling Road A 304 (Address)				
(Addices)				
Fort Lauderdale, Florida 33312				
(City/State and Zip Code)				
For furt	rther information concerning this matter, please call:			
Moham	(Name of Contact Person) at (	954 964-3363 Area Code & Daytime Telephone Number)		
Enclose	sed 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

statement of change is submitted for	as 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this a corporation organized under the laws of the State of Florida tered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Dra	gonre., Inc.,
2. The principal office address: 2699 Fort Lauderdale, Florida 3331	
3. The mailing address (if different):	
4. Date of incorporation/qualification	n: 01/08/07 Document number: P07000003172
5. The name and street address of the Florida Department of State:	e current registered agent and registered office on file with the
(if changed):  Mohamad Elze  2699 Stirling Re	pad A 304 (P.O. Box NOT acceptable)
	office and the street address of the business office of its registered agent,
	olution duly adopted by its board of directors or by an officer so daylon has been notified in writing of the change.
1-	registered agent and agree to act in this capacity. rovisions of all statutes relative to the proper and complete performance if and accept the obligation of my position as registered agent. Or, if this reflect a change in the registered office address, I hereby confirm that the ilitized this change.
(Signature of Registered Agen  If signing on behalf of an entity:	3-25-08 (Date)

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