

PORT000064117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

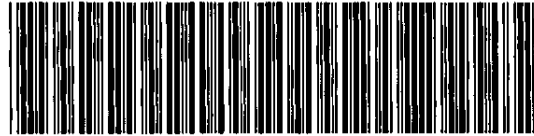
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/29/07--01013--021 **35.00

RECEIVED
07 AUG 29 AM 10:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED
07 AUG 31 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R-A. Chang

C. Couffette AUG 31 2007

PIU-

Charter Number Only

8/28 Jose

Jose C. Eduarte

Requestor's Name

1500 NE 13 Place

Address

Miami FL 33139

City

State

ZIP

Phone

5004A

VALIDATION ONLY

CORPORATION(S) NAME

Havana Joes Corp.

P07000064117

- | | | |
|--|---|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Foreign | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Annual Report | <input checked="" type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Reservation | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call If Problem | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Mail Out |
| <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up | |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier



Empire Toll Free: 1-800-432-3028

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Havana Soes Corp.
(Name of Corporation)

DOCUMENT NUMBER: PO7000064117

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:

Alberdo Soes.
(Name of Contact Person)

Havana Soes Corp.
(Firm/Company)

14240 SW 105 TERR.
(Address)

MIAMI FL. 33182.
(City/State and Zip Code)

For further information concerning this matter, please call:

Alberdo Soes. at (786) 251 5660.
(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

RECEIVED
07 AUG 31 PM 12:20
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

August 29, 2007

EMPIRE

MIAMI, FL

SUBJECT: HAVANA JOES, CORP.
Ref. Number: P07000064117

We have received your document for HAVANA JOES, CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

~~We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.~~

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) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 507A00051911

**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: Havana Joes Corp.
2. The principal office address: 14240 SW 105 TERR
MIAMI FL 33186
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 5/31/07 Document number: P07000064117

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Tax Defense Center, Inc.
2350 W 84 STREET #18
Hialeah, FL 33016

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

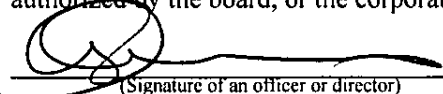
ALBERTO SOSA
14240 SW 105 TERR
(P.O. Box NOT acceptable)
MIAMI FL 33186

07 AUG 31 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

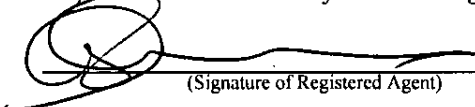
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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)

ALBERTO SOSA
(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)

7/31/07
(Date)

If signing on behalf of an entity:

(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
CR2E045 (8/05)