## P08(00040278

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

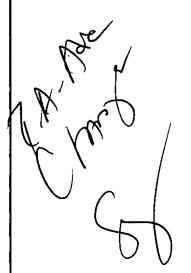
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## COVER LETTER ...

TO: Amendment Section Division of Cosporation	is .		
SUBJECT:	Kobeni Name of C	Inc Corporation	
DOCUMENT NUMBER:	00800	040278	
The enclosed Statement of Char	nge of Registered Offic	ce/Agent and fee are subm	itted for filing.
Please return all correspondence	e concerning this matte	er to the following:	
•	-	_	
	Yair S Name of Co	Shalev ontact Person	
	Kobe Firm/C	eni Inc Company	
	2410 Holl	vwood Blvd dress	
		· · · ·	
	City/State a	od fl 33020 and Zip Code	<del></del>
E-mail add	vshalev@ ress: (to be used for	msn.com future annual report not	ification)
For further information concern	ing this matter, please	cail:	·
Yair Sha		at ( <u>954</u> )	926 5644
Name of Contac	t Person	Area Code & Day	time Telephone Number
Enclosed is a \$35.00 check made	le payable to the Depa	rtment of State.	
Ameno Divisio P.O. B	g Address: dment Section on of Corporations Box 6327 assee, FL 32314	Street Addres Amendment S Division of C Clifton Build	Section Corporations

Tallahassee, FL 32301

TO:

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

statement of cha	provisions of sections 607.0502, ange is submitted for a corporation or to change its registered office of	on organized under	the laws of the S	tate of Florida	is
1. The name of t	the corporation: Kobeni Inc				
2. The principal	office address: 2028 Harrisor	n St Hollywood F	FL 33020		
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 4 2	08 Docu	ıment number:	P080	00040
	d street address of the current regretment of State: (If resigned, ente	_	gistered office or	n file with the	
	2028 Harrison St Hollywo	ood FL 33020			
				SEC.	2010
6. The name and (if changed):	d street address of the new registe	ered agent (if chang	ed) and /or regist		SEP-7
	2410 Hollywood Blvd Hol	llywood FL 3302			
	P.	O. Box NOT acceptable			Ď.
The street addre	ess of its registered office and the identical.	he street address of	the business off	ice of its registere	ed agent,
Such change wa authorized by th	as authorized by resolution duly he board, or the corporation has	y adopted by its box s been notified in w	ard of directors or riting of the cha	or by an officer songe.	
	re of an officer or director				Shallr
I hereby accept	the appointment as registered to comply with the provisions on I am familiar with and acceping filed merely to reflect a chass been notified in writing of this	agent and agree to If all statutes relativ If the obligation of I nge in the registere Is change.	act in this capa ve to the proper my position as re ed office address	city. and complete per egistered agent. ( , I hereby confirm	formance Or, if this 1 that the
	0		9.3.10	<b>)</b>	
Sign	gnature of Registered Agent		Date		
	ehalf of an entity: Sbalev				
	yped or Printed Name	<del>_</del>			

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