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COVER LETTER

TO: Am Div	endment Section ision of Corporations	
SUBJECT:	Sushi Plus, Inc. (Name of Corporatio	n)
DOCUME	NT NUMBER:	
The enclose	d Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.
Please retur	n all correspondence concerning this matter to the fo	llowing:
	ZORBA F. MARTI	N EL
	(Name of Contact Pers	on)
	(Firm (Common)	
	(Firm/Company)	
	6542 Couins Au (Address)	
	(Address)	•
	MIAMI BEAM - FC - 33 (City/State and Zip Co	141
For firethor	information concerning this matter, please call:	ide)
	•	
ZORBA	F. MARTINEE at (2) (Name of Contact Person) (A)	924 4052
	(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed is	a \$35.00 check made payable to the Department of	State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	ange is submitted	tions 607.0502, 617.050 for a corporation organ gistered office or registe	ized under the laws of	the State of	Florida	-
1. The name of	the corporation:_	Sushi Plus, Inc.				
2. The principal	office address:	6542 GomiNS	AV			
MIAMI	BEACH	FLOMIDA	33141			
3. The mailing	address (if differe	nt):				
4. Date of incor	poration/qualifica	ation:	Document numl	ber:		
		f the current registered a f resigned, enter resigne		fice on file w	ith the	
	Mr. Zorba M	lartinez			_	
	2115 Bay Dr	rive West, #2			_	
	Miami Beach	ı, FL 33141			基金	Manufact //
6. The name an (if changed):		f the new registered ager	nt (if changed) and /or	registered of	650	
	Remer & Ge	orges - Pierre, PLL	C			O
	100 North B	iscayne Blvd., Suite	2800		MID: 02	
	Miami, Fl 33	132	· · · · · · · · · · · · · · · · · · ·			
The street addr	ress of its register I be identical.	red office and the street	address of the busine	ess office of	its registered age	nt,
Such change wauthorized by	as authorized by the board, or the	resolution duly adopte corporation has been no	d by its board of dire	ctors or by a ne change.	n officer so	
	w Martito	ector)	ZONGA F. MA	15 NEE	"OWNER"	_
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment to comply with the nd I am familiar ing filed merely as been notified i	t as registered agent at he provisions of all sta with and accept the ob to reflect a change in th writing of this change	nd agree to act in this tutes relative to the pi ligation of my positio he registered office ac	capacity. roper and co n as register ddress, I hero	mplete performa ed agent. Or, if t eby confirm that t	nce his he
Tuderia	Hastiy ignature of Rogistered		10/01/	04		
				(Date)	,	_
0 0	ehalf of an entity	<i>/</i> :				
	MART NEG (Typed or Printed Nam	c)				

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