

P/20000016118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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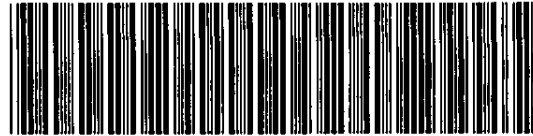
(Business Entity Name)

(Document Number)

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change

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FILED  
2012 MAY 29 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR  
5/30/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** P & R TECHNOLOGY INTERNATIONAL CORP  
Name of Corporation

**DOCUMENT NUMBER:** P12000016118

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:

**Lorena Laplaceliere**

Name of Contact Person

**P & R TECHNOLOGY INTERNATIONAL CORP**

Firm/Company

**5512 NW 114 Ave Unit 207**

Address

**Doral, FL 33178**

City/State and Zip Code

**lorenalaplaceliere@yahoo.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Lorena Laplaceliere**

Name of Contact Person

**786 277-8989**

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

**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: P & R Technology International Corp.
2. The principal office address: 5512 NW 114 Ave Unit 207 Doral Florida 33178
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: Feb 15, 2012 Document number: P12000016118

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Lorena Laplaceliere - Resigned

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

Lorena Laplaceliere


5512 NW 114 Ave Unit 207

P.O. Box NOT acceptable

Doral, FL 33178

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

Lorena Laplaceliere

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.*

May 22, 2012

Signature of Registered Agent

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 (03/12)

**FILED**  
**2012 MAY 29 PM 12:30**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**