## P120000 78302

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
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(Document Number)	<u> </u>
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: D. E Prod	Name of Corporation
DOCUMENT NUMBER:	2000078302
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:	
DAN	Name of Contact Person
Firm/Company	
6335 N	W 104 PATH
	Address
Do 12 p L FL 33/78  City/State and Zip Code	
DANIELELBITTAR @YAHOO.COM	
E-mail address (to be used for future annual report notification)	
For further information concerning t	his matter, please call:
DANIEL ELBIHA	at (954) 802 76 14 son Area Code & Daytime Telephone Number
Name of Contact Per	son Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made page	vable to the Department of State.
Mailing Ad Amendmer	dress: Street Address: Amendment Section
	Corporations Division of Corporations
P.O. Box 6 Tallahassee	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 FLOVENDE
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: D. E. PRODUCTIONS INC
2. The principal office address: 50 BISCAYNE BLVD APT 3107, MIAMI, FL.
33132
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number: P120000 78302
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)
DANIEL ELBITTARSO BISCAUNE BLUD APT 3107
MIAMI FLORIDO 33/32
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ANIEL ELBITTAR 6335 NW 104 PATH
P.O. Box NOT acceptable
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, of the corporation has been notified in writing of the change.
Signature of an officer or director    DANIEL ELBETT AGENT
Signature of arrotheer to director 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
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.
hereby confirm that the corporation has been notified in writing of this change.
and lie land
Signature of Registered Agent Date
If signing on behalf of an entity:
is signing on bentar 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)