

Attorneys At Law

June 16, 1997

2000022156**72**--1 -06/18/97--01059--012 ******35.00 ******35.00

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Change of Registered Agent

Dear Sir/Madam:

Enclosed is a form to change the Registered Agent for Twin W Enterprises, Inc. Also enclosed is a check in the amount of \$35.00 for this change.

Thank you for your attention to this matter.

Sincerely,

Mark W. Brandt

cm

Enclosure

97 JUN 18 PH 12: 10
SECRETARY OF STATE
TALL CHASSES OF CORE

Post Office Box 1178 595

595 Main Street Dun

Dunedin, Florida 34698 Telep

Telephone 813-733-0494

Fax 813-734-9581

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of $\underline{\texttt{Florida}}$, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.		
1 The name of the	corporation is: Twin W E	nterprises, Inc.
T. The hand of the	50.pd. a	,
1a. Date of incorpo	ration <u>1/20/94</u>	Document number P94000007033
2. The name and a	address of the current regis	stered agent and office:
Yan Yan Wond		<u> </u>
9621 Bay Pir	nes Boulevard	EE WILL
	urg, FL 33708 Idress of the new registere	d agent and office:
(P.O. B	ox Not Acceptable)	d agent and onice.
Jeffrey H. V		
	nes Boulevard	97.6
The street address of its registered agent 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. SIGNATURE		
	SIGNATI	(name and title) I allow H. Ww.
	DATE	6/16/97 TP
PROCESS FOR TH IN THIS CERTIFICA AGENT AND AGRE WITH THE PROVIS PLETE PERFORMA	MED AS REGISTERED AGI IE ABOVE STATED CORPO ATE, I HEREBY ACCEPT TO SEE TO ACT IN THIS CAPAC SIONS OF ALL STATUTES	ENT AND TO ACCEPT SERVICE OF DRATION AT THE PLACE DESIGNATED HE APPOINTMENT AS REGISTERED CITY. I FURTHER AGREE TO COMPLY RELATIVE TO THE PROPER AND COMPLY ISTERED AGENT.
		(Registered Agent) Jeffrey H. Wu 6/16/97
		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-90)

FILING FEE: \$35.00