## P94000061123

(Re	equestor's Name)	
(Ac	idress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: JOSeph F. Caprio, P.A. (Name of Corporation)		
DOCUMENT NUMBER: P9400001123		
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:		
Joseph Caprio (Name of Contact Person)		
(Firm/Company)		
4789 S.W. 148th Ave. # 103 (Address)		
Davie Florida 33331 (Cfty/State and Zip Code)		
For further information concerning this matter, please call:		
TOS-eph Caprio at (954) 434-1776  (Name of Contact Ferson) at (954) 434-1776  (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  Street Address: Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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 Flory do
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Joseph F. Capvio, P.A. E. S
2. The principal office address: 4789 SW 148th AVe., SUPE 103
Davie, FL 33331 855 2 -
3. The mailing address (if different): Same AS Above-
4. Date of incorporation/qualification: 9-1-94 Document number: P94000004423
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Joseph Caprio
2500 Weston Road, Suite 103
Weston, FL 33331
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Joseph Caprib
4789 SW 148th Ave., Suite 103
(P.O. Box NOT acceptable)
<u>Davie, FL 33331</u>
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.
Christopher Caprio, VP
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 14, 2007
Signature of Registered Agent) (Date)  If signing or behalf of an entity:
If signing on behalf of an entity:
(Typed or Printed Name)

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