

P94000071830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

RA Change

5-3-07

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: P. S. P. STRUCTURES CO.
(Name of Corporation)

DOCUMENT NUMBER: P94000071830

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:

PARVIZ SANIEI

(Name of Contact Person)

Construction

(Firm/Company)

832 HOLLYWOOD BLVD

(Address)

HOLLYWOOD FL 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

PARVIZ SANIEI

(Name of Contact Person)

at (954) 4105119

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2007

PARVIZ SANIEI
832 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33019

SUBJECT: P.S.P. STRUCTURES CO.
Ref. Number: P94000071830

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Document Specialist

Letter Number: 007A00028183

RECEIVED
07 MAY -2 AM 8:00
DIVISION OF CORPORATIONS

**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. S. P. STRUCTURES CO.
2. The principal office address: 832 HOLLYWOOD BLVD
HOLLYWOOD, FL 33019
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 09/27/1994 Document number: P94000071830
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ALL FLORIDA FIRM, INC.
465 S VOLUSIA AVE STE C
ORANGE CITY, FL 32763

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

PARVIZ SANIEI
832 HOLLYWOOD BLVD
(P.O. Box NOT acceptable)
HOLLYWOOD, FL 33019

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TALLAHASSEE, FLORIDA

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.

P. SANIEI
(Signature of an officer or director)

PARVIZ SANIEI (President - OWNER)
(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.

P. SANIEI
(Signature of Registered Agent)

04/30/2007
(Date)

If signing on behalf of an entity:

PARVIZ SANIEI
(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 (8/05)