

P 94000086599

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Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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REGISTERED AGENT CHANGE

ALTA TOURS IMP & EXP, INC.

Certificate of Status	0
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DIVISION OF CORPORATIONS

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**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,
the undersigned corporation organized under the laws of the State of 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: ALTA TOURS IMP & EXP, INC.

2. The mailing address of the corporation is: 7277 NW. 12 STREET
MIAMI, FL 33126

3. Date of incorporation/qualification: 11-30-1994 Document number: P94000086599

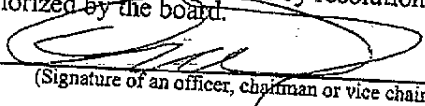
4. The name and address of the current registered agent and office:

EPITACIO C. NETO
7277 NW. 12 STREET, MIAMI FL 33126

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

ADOLFO E. IGLESIAS
13501 SW. 128th STREET
MIAMI, FL 33186

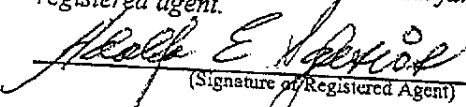
The street address of its registered office and the street address of the business office of its registered
agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board.


(Signature of an officer, chairman or vice chairman of the board)

6-20-00
(Date)

LUIZ A. RIBEIRO - PRESIDENT
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated
corporation, 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.


(Signature of Registered Agent)

6-20-00
(Date)

If signing on behalf of an entity:

ADOLFO E. IGLESIAS
(Typed or Printed Name)

REGISTER AGENT
(Capacity)

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

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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