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City/State/Zip			Office Use Onl	у
CORPORATION NA	ME(S) & DOCUMI	ENT NUMBER(S), (if known):	
1. (Corporation Name)		(Document #)	10
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3(Corporate	ion Name)	(Document#		HE BY STATE OF THE
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NEW FILINGS	AMENDMENT	S TENEDE		
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NonProfit	Resignation of R.A.,	Officer/ Director	-08/18/97 *****35	?01069017 00 *****35.00
Limited Liability	Change of Registered	l Agent		
Domestication	Dissolution/Withdray	Dissolution/Withdrawal		
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OTHER FILINGS Annual Report	REGISTRAT	ION/A	choldowy.	1
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CR2E031(1/95)

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0 undersigned corporation organized under the laws of the	
submits the following statement in order to change its re	egistered office or registered agent, or both, in the
1. The name of the corporation is: ALLTRAD.	PR INTERNATIONAL BUSINESS, CORP.
	CORP.
2. The mailing address of the corporation is: 2501	COLLINS AUE STE H-105A
M. BEACH	FA 33139
 3. Date of incorporation/qualification: 4/17/95 4. The name and address of the current registered agent and address of the current regis	Document number: Parocosio78 and office:
EQUARDO J. PER	EZ
BROO COLLINS AUE	# 67
MBEACH FLA 33	140 Zes 97
5. The name and address of the new registered agent and	office: (P.O. Box Not Acceptable)
EQUARDO J. PER	
2301 COLLINS AU	
M BEACH, FLA	
The street address of its registered office and the street a agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by authorized by the board.	by its board of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the board)	(Date)
EDUARDO J. PEREZ -	PRESIDENT
(Printed or typed na	me and title)
Having been named as registered agent and to accept see I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with and accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with an accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I am familiar with a accept the obligation of my pand I accept the obligation of my pand I am familiar with a accept the	rvice of process for the above stated corporation, agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent.
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)
CR2E045(1/95)	FILING FEE: \$35.00