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*Law Offices*  
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PROFESSIONAL ASSOCIATION

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Via FedEx

December 16, 2004

Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Second Avenue Playhouse, Inc.

Dear Sir:

Enclosed please find the following:

- a) Statement of Change of Registered Agent;
- b) Check in the amount of \$35 representing the fee in this regard.

I would appreciate it if you would file this document at your earliest convenience.

Very truly yours,



GERALD R. PUMPHREY

GRP:jp  
Encs.  
cc: Client  
Second.51

**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: Second Avenue Playhouse, Inc.
2. The principal office address: 19705 NW 2nd Avenue, Miami FL 33169
3. The mailing address (if different): 19839 NW Second Avenue, Miami FL 33169
4. Date of incorporation/qualification: 6/23/95 Document number: P95000049176
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Gerald R. Pumphrey

11000 Prosperity Farms Road #300

Palm Beach Gardens, FL 33410

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

Norman Hickmore

19839 NW Second Ave., Miami FL 33169

(P.O. Box NOT acceptable)

**FILED**  
04 DEC 17 PM 1:54  
SECRETARY OF STATE  
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.

  
(Signature of an officer or director)

Norman Hickmore

(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.*

  
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(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