## MAKMAGKMED

•	WART & CO., P.A.	りじん
City/Sta	te/Zip Phone #	Office Use Only
1. Islan	N NAME(S) & DOCUMENT NU  RISH STATE  Orporation Name  (Composition Name)	MBER(S), (if known):  MS JAC, Document #)
4.		Document #)  Document #)  Certified Copy  Certificate of Status
NEW FILINGS Profit NonProfit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., Officer/ Dir  Change of Registered Agent  Dissolution/Withdrawal  Merger	
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION  Foreign Limited Partnership Reinstatement	FILED 97 JUN 12 AM 9 SECRETARY OF STAT TALLAHASSEE, FLORI

Trademark

Other

Examiner's Initials

## 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, 617.0502, 6 undersigned corporation organized under the laws of the State	•		
submits the following statement in order to change its register			
State of Florida.  1. The name of the corporation is:Island Resort Systematics.	ems. Inc.		
2. The mailing address of the corporation is: 7751 NW 29th Street, Margate, FL 33063			
<ul> <li>3. Date of incorporation/qualification: 12/18/95</li> <li>4. The name and address of the current registered agent and of</li> </ul>			
The Law Firm of Lawrence J. Spiegel.	Chrtd.		
343 Almeria Avenue			
Coral Gables, FL 33134			
5. The name and address of the new registered agent and office	e: (P.O. Box Not Acceptable)		
Harry J. Swart, CPA			
717 East Oak Street	Total 9		
Kissimmee, FL 34744			
The street address of its registered office and the street address agent, as changed, will be identical.	s of the business office of its registered		
Such change was authorized by resolution duly adopted by its authorized by the board.	board of directors or by an officer so		
	6-10-97		
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
Armond J. Federico President			
(Printed or typed name and Having been named as registered agent and to accept service I hereby accept the appointment as registered agent and agre comply with the provisions of all statutes relative to the proper and I am familiar with and accept the obligation of my position.	·		
( Ima	5/15/97		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity:			
(Typed or Printed Name)	(Capacity)		

FILING FEE: \$35.00

CR2E045(1/95)