### Florida Department of State

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#### REGISTERED AGENT CHANGE

ANCALMO CORP.

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1 ISSION OF CORPORATION

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## 4000001827343

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Ancalmo Corp.	
	•	reet, VIPSAL #1917, Miami, Florida 33166
3. The mailing a	ddress (if different):	
4. Date of incorp	ooration/qualification: 1/18/1996	Document number: P96000005842
	street address of the current regist truent of State:	tered agent and registered office on file with the
	Peninsula Registered Agents Inc	
,	200 South Biscayne Blvd, #4874	HASE L
	Miami, Florida 33131	SEE E. O. SEE E.
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office
	Business Filings Incorporated	<b>D</b>
	1203 Governors Square Blvd, Suit	
	(P.O. Box NOT ac	cceptable)
	Tallahassee, Florida 32301-2960	
The street addre as changed will	ss of its registered office and the be identical.	street address of the business office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
		Mario E. Ancalmo, President
	re own officer or director)  The appointment as registered ago comply with the provisions of a d I am familiar with and accept to filed merely to reflect a chang been notified in writing of this c	(Printed or typed name and title) tent and agree to act in this capacity all statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this te in the registered office address, I hereby confirm that the thange
U.S.	الا	19th day of June, 2006
(Sig	nature of Registered Agent)	(Date)
If signing on bel	nalf of an entity:	
Mark Schiff, AV	P yped or Printed Name)	•

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