P96000022366



FOR ALL YOUR IMAGING NEEDS!

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name) (Document #) (Corporation Name) (Document #)
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□ Walk in □ Pick up time □ Certified Copul ← □
Mail out Will wait Photocopy Certificate of Status
NEW FILINGS AMENDMENTS D S S S S S S S S S S S S
Profit
Not for Profit Resignation of R.A., Officer/Director
Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal
Domestication Other Dissolution/Withdrawal Merger
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OTHER FILINGS REGISTRATION/QUALIFICATION
Annual Report Fictitious Name Foreign Limited Partnership
Domestication Other Dissolution/Withdrawal Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Fictitious Name Foreign Reinstatement Trademark Other Other

CR2E031(7/97)

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

the State of Florida. 1. The name of the corporation:	
<u> </u>	
2. The mailing address of the corporation: 3000-5 NW 25th Ave	
POMPANO BEACH, FL33069	
3. Date of incorporation/qualification: 03/12/96 Document number: P960000	12366
4. The name and address of the current registered agent and office:	
SERGIO A. SANTOS	<u> </u>
6700 WAVERLY LANE	<u>.</u>
LAKE WORTH FL 33467 Es -	
5. The name and address of the new registered agent (if changed) and/or registered office (if change (P. O. Box Not Acceptable)	·
MARIA DAS BROOKE	
_ 6700 WAVERLY LANE SEE	
LAKE WORTH, FL 33467 3 2	
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 apporting so authorized by the board.	O
whoreasthut = 2/26 TO1	
Signature of an officer, chairman or vice chairman of the board) (Date)	
MARIA DAS BROOKE, V.P. (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.	
mporeastent 3/26/01	in the second
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
(Torol - Direct IN)	
(Typed or Printed Name) (Capacity)	
* * * FILING FEE: \$35.00 * * *	
CR2E045(9/00)	

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS