## PAACE Travel Associates, Onc.

Paul J. Corin President Adam M. Corin. Vice President

## P96000062916

January 6, 1997

Division of Corporations
Florida Department of State
Sandra B. Mortham, Secretary of State
P.O. Box 6327
Tallahassee, FL 32314

600002052626---S -01/09/97--01054--015 \*\*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Re: PAACE Travel Associates, Inc. - Document No. P96000062916

**Dear Division of Corporations:** 

Please be advised that the corporate address has changed to 20449 State Road 7; Suite AA-10, Boca Raton, FL 33498. Kindly have all correspondence directed to this new address.

Thank you for your attention to this matter.

Sincerely,

Adam M. Corin Vice-President

AMC/me

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## 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, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida.  18. The name of the corporation is: IMACE IZAVEL ASSOCIATES, INC.  19. The mailing address of the corporation is: 20449 STATE ROAD 7. SUITE AA-19  BOCA RATOL, FL 33-198			
		1c. Date of Incorporation: July 26, 1996	_ Document number: P9600062916
		2. The name and address of the current register	red agent and office:
CORPORATION Service Compa	NAY		
1201 Hails Stree	+ 914		
Tallahassee, Fl.	4. 72301		
3. The name and address of the new registered a	gent and office:(P.O. Box Not Acceptable)		
7650 LAGO DEL MAZ DI	2. #704 J		
BOCA PATON , FL 33.	133		
The street address of its registered office and registered agent, as changed, will be identical.			
Such change was authorized by resolution duly a so authorized by the board.	dopted by its board of directors or by an officer		
Ada, P	1-6.97		
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
ADAM M. COZIN	•		
(Printed or typed name and title)			
Having been named as registered agent and to corporation, I hereby accept the appointment as I further agree to comply with the provisions of performance of my duties, and I am familiar with registered agent.	registered agent and agree to act in this capacity. fall statutes relative to the proper and complete		
THE TOTAL TO	1-6-9 7		
(Signature of Registered Agent) If signing on behalf of an entity:	(Date)		
Ann NA Collins			
(Typed or Printed Name)	VICE - PRESIDENT (Capacity)		
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314