

P97000015070

JUNE 18, 1997

TO WHOM IT MAY CONCERN -

- I Polycarpe Raymond, REQUEST A COPY OF
- ① THE CHARTER (ARTICLES OF INCORPORATION)
  - ② BY LAWS IF ANY

DOCUMENT NUMBER: P97000015070 ST: F/  
NAME: PSYCR VIDEO PRODUCTIONS CORP

MAILING ADDRESS: PSYCR VIDEO PRODUCTIONS CORP  
ATTN: POLYCARPE RAYMOND  
P.O. BOX 420817  
KISS, FL 34742-0817

THANKS FOR YOUR TIME

SINCERELY YOURS,

Polycarpe Raymond

700002219817-3  
-06/23/97 -01097-010-3  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

N.B Enclosed you will find

~~XXXXXX/XXXXXX~~ N/A

1 CHECK FOR \$35

1 COPY OF A STATEMENT OF CHANGE OF  
AND REGISTERED OFFICE

FILED  
97 JUN 23 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AGENT

R.A. Charge

NS

6-26-97

**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 submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: PSYCR VIDEO PRODUCTIONS CORP

2. The mailing address of the corporation is: P.O. BOX 420817  
KISS FL 34742-0817

3. Date of incorporation/qualification: 2-13-97 Document number: P97000015070

4. The name and address of the current registered agent and office:

MITTS, TIMOTHY J  
7217 EAST COLONIAL DRIVE #212  
ORLANDO, FL 32807

5. The name and address of the new registered agent and office. (P.O. Box Not Acceptable)

POLYCARPE RAYMOND  
902 RACHNA LA SUITE K  
KISSIMMEE, FL 34741

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.

Polycarpe Raymond  
(Signature of an officer, chairman or vice chairman of the board)

6-18-97  
(Date)

POLYCARPE RAYMOND PRESIDENT (CHAIRMAN)  
(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.

Polycarpe Raymond  
(Signature of Registered Agent)

6-18-97  
(Date)

If signing on behalf of an entity:

POLYCARPE RAYMOND  
(Typed or Printed Name)

PRESIDENT / CHAIRMAN  
(Capacity)