

P97000029214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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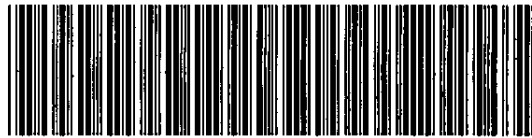
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
ALLAHASSEE, FLORIDA

each cu  
7-2-07

**TO:** Amendment Section  
Division of Corporations

(Name of Corporation)

**Please return all correspondence concerning this matter to the following:**

(Name of Contact Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

- PISTERMAN, LUIS G  
1200 NW 78 AVENUE SUITE 216  
MIAMI - FL 33126

- PISTERMAN, LUIS G**  
**9766 S.W. 24TH. ST SUITE #3**  
(P.O. Box NOT acceptable)  
**MIAMI - FL 33165**

CR2E045 (8/05)