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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: MET COMMUNICATIONS, ZINC. (Name of Corporation) | | |
| DOCUMENT NUMBER: P970000 29290 | | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| JORGE E. GUTTERREZ (Name of Contact Person) MET COMMUNICATIONS, INC. (Firm/Company) | | |
| 13910 NV FLORTUM AVE | | |
| TOMPA, FL 33617 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| TORGEE. GUTTERREZ at (813) 936-0200 (Area Code & Daytime Telephone Number) | | |

Enclosed is a \$35.00 check made payable to the Department of State.

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

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, this statement of change is submitted for a corporation organized under the laws of the State of FLORING |
|---|
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: MET COMMUNICATIONS, INC. |
| 2. The principal office address: 13910 N. FLORIUM NVE |
| 3. The mailing address (if different): P. O. BOX 17180 |
| TAMPA, FL 33682 |
| 4. Date of incorporation/qualification: 3/31/97 Document number: P 970000 29 29 29 C |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| THOMPSON, BRYAN |
| 13910 N. FLORIDA. AVE |
| TAMPA, FL 336/3 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| GUTTERREZ, JORGE E. |
| 13910 N. FLORIDA AVE |
| Trampa, Fr. 33613 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be deficial. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. |
| (Signaphie of an exticer of greector) PRESIDENT SECRETARY (Printed or typed name and title) |
| I hereby accept the appointment as registered agent and agree to act in this capacity. If 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| (Signature of Registered Agent) 8/23/06 (Date) |
| If signing on behalf of an entity: |
| TORGE E. GOTTERREZ. (Typed or Printed Name) |

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