P970000 30600

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16
Address

MIAMI, FLORIDA 33174 (305)552-5973

City/State/Zip Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

800002154928---4 -04/25/97--01045--008 *****35.00 ******35.00

Office Use Only

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

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VI.	NEW FILINGS		AMEND Amendmen	MENTS			-	57 :-	;
	NonProfit		Resignation	of R.A., Officer/	Director		:	3	•
	Limited Liability		Change of F	Registered Agent			÷ .	:	•
	Domestication		Dissolution	/Withdrawal			:	: .	
	Other		Merger					7	
	OTHER FILINGS Annual Report		REĞİ QÜAL	TRATION/LIFICATION		4128)	<i>A</i>	

Foreign

Other

Limited Partnership

Reinstatement Trademark

Examiner's Initials

Fictitious Name

Name Reservation

Florida Department of State, Jim Smith, 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
1a. The name of the corporation is: San Benett Corporation
1b. Date of incorporation 4-4-97 Document number P9700003060
2. The name and address of the current registered agent and office:
Gladys Benett
1431 NW 27 Street Hiami FL 33945
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Regle M Gon Tale 2
1521 NW 29 Ct High FL 33105 75
The street address of its registered agent 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.
SIGNATURE Typed or printed nake and title DATE Tourn General Traviation Typed or printed nake and title
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.
SIGNATURE Regla M. Gonzale 2 (Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

FILING FEE: \$35.00