

P97000070434

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October 24, 1997

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*****35.00 *****35.00

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

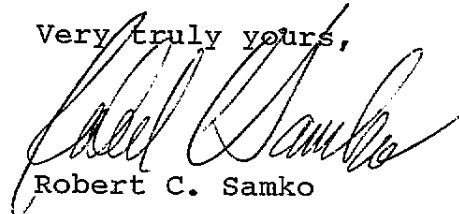
Re: Dur-A-Shield of Florida, Inc.

Gentlemen:

Enclosed please find the change of registered agent and
a check for the filing fee in the amount of \$35.

If you have any questions please call me.

Very truly yours,



Robert C. Samko

cc: Philip J. Baratta

FILED
97 OCT 28 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Due
10/30

R.A. change

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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: Dur-A-Shield of Florida, Inc.
2. The mailing address of the corporation is: _____
3. Date of incorporation/qualification: August 14, 1997 Document number: P97000070434
4. The name and address of the current registered agent and office:

Amerilawyer Chartered

343 Almeria Avenue

Coral Gables, FL 33134

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

James L. Eifler

2800 North Flager Drive Apt. 305

West Palm Beach, FL 33407

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.

X [Signature]
(Signature of an officer, chairman or vice chairman of the board)

October 21, 1997
(Date)

Philip J. Baratta, President
(Printed or typed name and title)

October 21, 1997
(Date)

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.

X [Signature]
(Signature of Registered Agent)

October 21, 1997
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA