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NEW FILINGS	AMENDMENTS	The state of the s	
Profit	Amendment		
NonProfit	Resignation of R.A., Office	cer/Director	
Limited Liability	Change of Registered Age		
Domestication	Dissolution/Withdrawal		
Other	Merger		·
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OTHERFILINGS	REGISTRATIO		
Annual Report	QUALIFICATIO	J-3,45	
Fictitious Name	Foreign		
Name Reservation	Limited Partnership		
	Reinstatement		
	Trademark		
	Other		 .

Examiner's Initials

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 S	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: <u>Ecotech Services, Inc</u>	
2. The mailing address of the corporation is: Ro. Box 4546, Deerchield Beach	h, FC
33442	
3. Date of incorporation/qualification: \(\frac{\frac{F}{z\cup / 97}}{2\cup / 97} \) Document number: \(\frac{P970000}{2} \)	75283
4. The name and address of the current registered agent and office:	
HU DANIEL MONTAGUE	^
232 NW 95 Ave.	င် = ====
Plantation FL 33324	= 7
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptate):	ယ် 🎏
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170 NW Spanish River Blud # 20 BATON, FL 33431	
BOCO RATION, Ph. 33431	
The street address of its registered office and the street address of the business office of its regard, as changed, will be identical.	gistered
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the standard.	er so
(Signature of American, chairman or vice chairman of the board) Tuly 22, 199 (Date)	
Phillip A. BARTEL (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 cape 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.	acity. te
- A //- (A	
(Signature of Registered Agent) (Date) 7/21/99	
If signing on behalf of an entity:	
O (qa A. 13 ARTEK R/A (Typed or Printed Name) (Capacity)	

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