

DOCUMENT # P98000001593

1. Entity Name

MINERAL EXCHANGERS SERVICES, INC.

1. Entity Name

Principal Place of Business	Mailing Address
10315 SW 24 ST APT 102 MIAMI FL 33165 US	10315 SW 24 ST APT 102 MIAMI FL 33165-7957 US

2. Principal Place of Business	3. Mailing Address P.O. Box 832614
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State Miami, FL
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Zip	Country	Zip	Country
		33283	USA

6. Name and Address of Current Registered Agent

FL	Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

[illegible][illegible]

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, and all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90194 044 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number	65-0885486	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

CR2F034 (9/99)