P98000003976

(Re	equestor's Name)	
		_
(Ac	ldress)	
(Ad	ldress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
		
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	cument Number)	
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Special Instructions to I	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporation	ns	
SUBJECT:	Xcite, Inc	
	(Name of Co	rporation)
DOCUMENT NUMBER:	P9800000397	<u>76</u>
The enclosed Statement of Cha	inge of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence	e concerning this matter t	to the following:
	-	-
	William Be	aslev
	(Name of Cont	act Person)
	(Firm/Con	npany)
	1 Oakwood Bir	vd, Suite 200
	(Addre	ess)
	Hollywood, Flo	
44	(City/State and	Zip Code)
For further information concern	ning this matter, please ca	II:
Nikki Sepul	vado	at (954) 775-4978 (Area Code & Daytime Telephone Number)
(Name of Conta	ict Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35,00 check ma	de payable to the Departn	nent of State.
<u> Mailin</u>	ng Address: dment Section	Street Address: Amendment Section
	dment Section	Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	-		2, 607.1508, or 617.1508, Florid ized under the laws of the State (5
· · · · · · · · · · · · · · · · ·	= -		ered agent, or both, in the State of		
1. The name of the	e corporation:	>	(cite, Inc		
2. The principal o	ffice address:	1 Oakw	ood Blvd, Suite 200		
		Hollywo	ood, Florida 33020	<u>.</u>	
3. The mailing ad	dress (if different):				
4. Date of incorpo	ration/qualificatio	n: 1/12/1998	Document number: P980	000003976	
5. The name and s Florida Departr		e current registered a	gent and registered office on file	with the	
_		Shelby R. M	fims		
•••	1	Oakwood Blv	d, Suite 200		
-		Hollywood, Flo	rida 33020		95
6. The name and s (if changed):	street address of the	e new registered agen	t (if changed) and /or registered	office	SEP 28
		Hugh Mcl	view		至「
		707 NE 195th	Street		ن يو
	Norti	(P.O. Box NOT acceptable) Miami Reach	n, Florida 33179	AGA AGE	58
		<u></u>			
as changed will be	of its registered e e identical.	office and the street	address of the business office of	of its registered	agent,
Such change was authorized by the	authorized by res board, or the corp	olution duly adopted poration has been no	by its board of directors or by tified in writing of the change.	an officer so	
(Signature	of an officer or director,	4.	Brandon Samuels (Printed or typed name a	Vice Presid	ent
I hereby accept th I further agree to of my duties, and document is being corporation has b	te appointment as comply with the p I am familiar with g filed merely to re een notified in wi	registered agent and provisions of all state and accept the obli- eflect a change in the iting of this change.	d agree to act in this capacity tes relative to the proper and c gation of my position as registe registered office address, I he	complete perfo ered agent. Or ereby confirm t	rmance r, if this hat the
19			September 15	5, 2005	
(Signa	ture of Registered Agen	0	(Date)		
If signing on beha	of an entity:				
 _	h McNew ed or Printed Name)				
(1ур	od of Printed Name)	* * * FILING FE	K: \$35 00 * * *		
		riling fe	E: 300.UU " " "		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)