

P98000009056

Charter Number Only

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VALIDATION ONLY

111100 Elizabeth

Terminello & Terminello

Requestor's Name  
2700 SW 37 AVE

Address  
Miami, FL 33133

City State ZIP Phone  
30544 45002

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

CORPORATION(S) NAME

The Opa Locka Diner, Inc.

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



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G. COULLETTE JAN 12 2000

# 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: THE OPA LOCKA DINER, INC.

2. The mailing address of the corporation is: 14511 N.W. 27th Avenue, Opa Locka, FL 33054

3. Date of incorporation/qualification: 01/29/98 Document number: P9800009056

4. The name and address of the current registered agent and office:  
Robert F. Lewis, Esq., Chadroff, Terminello & Terminello  
2700 S.W. 37th Avenue, Miami, FL 33133

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5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  
Louis J. Terminello, Esq.  
Terminello & Terminello, P.A.  
2700 S.W. 37th Avenue

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.

Concetta Matrone 12/10/99  
(Signature of an officer, chairman or vice chairman of the board) (Date)

Concetta Matrone, President, Director  
(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 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] 12/10/99  
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:  
Louis J. Terminello Registered Agent  
(Typed or Printed Name) (Capacity)

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