

D. CONNELL FEB 1 5 2000

## +3053745095 T-457 P.03/03 F-703 FROM-AKERMAN SENTERFITT & EIDSON FEB-15-00 01:14PM 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 FLORIDA undersigned corporation organized under the laws of the State of \_ 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: GLOBAL FINANCIAL SERVICES INSTITUTE, INC.

1390 South Dixie Highway - Suite #2120 2. The mailing address of the corporation is:\_\_\_\_

Coral Gables, FL 33146

3. Date of incorporation/qualification. February 18, 1998Document number. P98000015040

4. The name and address of the current registered agent and office.

INTRASTATE REGISTERED AGENT CORPORATION

701 Brickell Avenue, Suite 3000

Miami, Florida 33131

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

AMERICAN INFORMATION SERVICES, INC.

One Southeast Third Avenue -28th Floor

Miami, Florida 33131-1714

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.

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(Signature of on officer, chamman of vice chairman of the board)

JOSEFINA VARGAS - Corp. Secretary

(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 agen

including of Registered Agen

If signing on behalf of an entity:

Angelica	Μ.	Calabrese

(Typed or Printed Name)

Vice President (Capacity)

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

CR2E045(7/97)

DIVISION OF CORPORATIONS FAX AUDIT No. HOOOOOOO06929 4

P.O. Box 6327

TALLAHASSEE, FL 32314