P98000036837

(Requestor's Name)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

K. A. Choy
MAR 7150

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SANTACARS CORP.
(Name of corporation)

DOCUMENT NUMBER: P98000036837

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PEDRO P. SAEZ, ESQ.
(Name of person)

SAEZ & ASSOCIATES
(Name of firm/company)

888 BRICKELL AVE., 5TH FLOOR
(Address)

MIAMI, FL 33131
(City/state and zip code)

For further information concerning this matter, please call:

HERNANDO SANTACOLOMA at (305) 463-7333
(Name of person) (Area code & daytime telephone number)

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENTOFCHANGEOFREGISTEREDOFFICEORREGISTERED AGENTORBOTHFORCORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: SANTACARS CORP.

2. The principal office address: 5520-5530 NW 84th Avenue
Miami, FL 33166

3. The mailing address (if different): same

4. Date of incorporation/qualification: APRIL 23, 1998 Document number: P98000036837

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

AMERILAWYER
343 ALMERIA AVE.
CORAL GABLES, FL 33134

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

PEDRO P. SAEZ, ESQ.
888 BRICKELL AVE. 5TH FLOOR
(P.O. Box or personal mailbox NOT acceptable)
MIAMI, FL 33131

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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, or the corporation has been notified in writing of the change.

(Signature of an officer, chairman or vice chairman of the board) Hernando Santacoloma (Printed or typed name and title)

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 obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)

FILING FEE: $35.00

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO :
DIVISION OF CORPORATIONS , P.O. BOX 6327, TALLAHASSEE, FL 32314