P98000066360

300002932283--8 -07/15/99--01060--009 ****105.00 *****35.00 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time Photocopy Certificate of Status Will wait Mail out AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Domestication Dissolution/Withdrawal Merger Other OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership

Examiner's Initials

CR2E031(1/95)

Name Reservation

Reinstatement

Trademark

Other

FLORIDA DEPARTMENT OF STATE, SANDRA B. MORTHAM, SECRETARY OF STATE

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 <u>FLORIDA</u> SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH, IN THE STATE OF FLORIDA.

1A. THE NAME OF THE CORPORATION IS: AZU CLE	ANING SERVICES CORP
	The state of the s
1B. THE MAILING ADDRESS OF THE CORPORATION IS:	2805 E Oakland Park Blvd.
Suite 186, Ft.Lauderdale, F1. 333	
1C. DATE OF INCORPORATION: 7/27/1998 DO	DCUMENT NUMBER P98000066360
2. THE NAME AND ADDRESS OF THE CURRENT REGISTS	ERED AGENT AND OFFICE:
Arun Vidyarthi	
723 Tivoli Circle,	Apt. 104
Deerfield Beach, F1.	33441
3. THE NAME AND ADDRESS OF THE NEW REGISTERED	AGENT AND OFFICE: (P.O. BOX NOT ACCEPTABLE)
Zuleima Anchelia	
5263 N Dixie Hwy.Ap	t. B1
Ft.Lauderdale, F1.	33334
REGISTERED AGENT, AS CHANGED WILL BE IDENTICAL SUCH CHANGE WAS AUTHORIZED BY RESOLUTION DUI OFFICER SO AUTHORIZED BY THE BOARD.	
(SIGNATURE OF AN OPPICED OF JEMAN) OF	7/10/99
(SIGNATURE OF AN OFFICER, CHAIRMAN OR VICE CHAIRMAN OF THE BOARD)	DATE
Arun Vidyarthi, President (PRINTED OR TYPED NAME OR TITLE)	- · · · · · · · · · · · · · · · · · · ·
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF A PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH A RESISTERED AGENT.	REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I LL STATUTES RELATIVE TO THE PROPER AND COMPLETE AND ACCEPT THE OBLIGATION OF MY POSITION AS
(SIGNATURE OF REGISTERED AGENT)	7/10/99
(MOINT OF OF INCODINGED MOENT)	(DATE)
Zuleima Anchelia	Officer
(TYPED OR PRINTED NAME)	(CAPACITY)
DIVISION OF CORPORATIONS, P.O. BOX 632	7. TALLAHĀSSEĖ, FL 32314 FILING FFF: \$35.00