P98000068065



ACCOUNT NO. : 072100000032

REFERENCE :

235731

4720528

AUTHORIZATION

ORDER DATE: May 11, 1999

ORDER TIME: 12:39 PM

ORDER NO. :

235731

CUSTOMER NO: 4720528

600002871496--6

CUSTOMER:

Ms. Marlis J. Spear

Holland & Knight

Suite 2600

200 South Orange Avenue

Orlando, FL 32801

CHANGE OF AGENT

ELECTROBRITE USA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

Tamara Odom CONTACT PERSON:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6	,
the undersigned corporation organized under the laws of the S	
submits the following statement in order to change its register the State of Florida.	ed office or registered agent, or both, in
1. The name of the corporation is: ELECTROBRITE USA, IN	IC -
1. The finale of the corporation is.	
2. The mailing address of the corporation is: 315 Paint St	reet
Rockledge, F	L 32955
3. Date of incorporation/qualification: July 31, 1998	Document number: p98000068065
4. The name and address of the current registered agent and of	
David Shead	
David Shead 1351 Twin Rivers Boulevard Oviedo, FL 32765	19 H
Oviedo, FL 32765	HAON -
5. The name and address of the new registered agent and office	: (P. O. Boxot Acceptable)
CORPORATION SERVICE COMPANY	FUF S. D
1201 Hays Street	
Tallahassee, FL 32301	→
The street address of its registered office and the street addres agent, as changed, will be identical.	s of the business office of its registered
Such change was authorized by resolution duly adopted by its authorized by the board.	board of directors or by an officer so
	5/1/99
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Daniel LaRocque, President	<u></u>
(Printed or typed name and title)	
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered ag I further agree to comply with the provisions of all statutes reperformance of my duties, and I am familiar with and accept registered agent.	ent and agree to act in this capacity. lative to the proper and complete
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
/Tired or Diet d New	(0,)
(Typed or Printed Name)	(Capacity)

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