P980000010153

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: European Street of Beach, Inc. (Name of corporation)
DOCUMENT NUMBER: P98000070153
Please return all correspondence concerning this matter to the following:
Mary M. Malone
(Name of person)
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: Mary M. Malone (Name of person) European Street of Beach, Inc. (Name of firm/company)
5500 Beach Blvd.
(Address)
Jacksonville, FL 32207
(City/state and zip code)
For further information concerning this matter, please call:
Mary M. Malone at (904) 398-1717 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Malling Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32399

CR2E045(09/03)

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

change is submit	provisions of section ted for a corporation tstered office or res	on organized unde	r the laws of i	he State of F				
1. The name of the	he corporation:	European St	treet of B	each, Inc.	- 			
2. The principal office address: 5500 Beach Blvd								
		Jacksonvill	e FL 32	207				
3. The mailing ac	ddress (if different)	ţ				·	·· <u>·</u>	
4. Date of incorp	oration/qualification	on: 08/06/199	38 Doci	iment number:	1980000701	5 3		
	street address of the timent of State:	e current registere	d agent and re	gistered office	on file with the			
	Grady Will:	ams, Jr.				·-		
	1279 Kings	ley Avenue, S	Suita 117			- IAI	40	
	Orange Parl	c. FL 32073	<u>-</u>			_ AA	MAR .	-T-Y
6. The name and (if changed):	street address of th	-				H.	04 MAR -3 PH	<u>:</u> =
		Mary 1	n m	alone		, FL		ئــ
	E	Mary M Wropean (P.O. Box or perso O Beach	St.	Cafe	-		0	
	550	(P.O. Box or perso	cal muilbox NOT	(cceptable)	4 con 1	lo El	231	N
The street addre	ss of its registered							
	s authorized by recorporation has b							
1/1	May M	molme	·	Mary	M Mx/v	Dr. Pr	esid a	, E
l hereby accept I further agrée t duttes, and I am being filed mere	the appointment a to comply with the familiar with and ly to reflect a char writing of this cha	s registered agent provisions of all t accept the obliga- age in the register	t and agree to stautes relati stion of my po ed office add	act in this cap ve to the prope sition as regist ress, I hereby c	acity r and complete j ered agent. Or, onfirm that the	performance if this document corporation	e of my ment is has	
	Muy M	malne	·		3/1/04			
	half of an entity:	e gent)			(Tritte)			
	Charact on Drivered Manne				(Cameras)			

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