## P98000071472

(Requestor's Name)
(Address)
, ,
(Address)
(Oile (Obete 77)) The ana 45
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400008618294

10/29/02--01080--001 \*\*35.00

02 OCT 28 AM 8: 34

as of its

## TRANSMITTAL LETTER

SUBJECT: WA-PASKOW In C (Name of corporation)
DOCUMENT NUMBER: 098 000071477
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:
Wency Paskow (Name of person)
WA PASKOW INC (Name of firm/company)
318 indiantace
WeSton FA-33326 (City/state and zip code)
For further information concerning this matter, please call:  We will be the concerning this matter, please call:  (Name of person)  at (305) 86557655  (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

Amendment Section Division of Corporations

TO:

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

## 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,
this statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: WA PASKOW IN C   DBA CONCOURSE GOL POTION 18
2. The principal office address: 318 India n +acl
We ston Ela: 33326
3. The mailing address (if different):
4. Date of incorporation/qualification: 1997 Document number: 098000071472
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
Wendy Paskow EE 3 T
1039 Kn np Concourse SE &
Pay Hadorish F1 33326 F9 € 1
T <sub>σ</sub> <sub>∞</sub> O
6. The name and street address of the new registered agent (if changed) and /or registered of the changed):
Han Derl Man
Fraller White Rumatt O.A.
(P.O. Box or personal mailbox NOT acceptable)
100 Southeast Second St Seventeenth Fe. Mami F
The street address of its registered office and the street address of the business office of its registered 3313 [
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.
MANDY DARKON DOPC.
(Signature 87 an officer, chairman of the board) (Printed or typed name and title)
t 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
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 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) 10 2 4 0 2
If signing on behalf of an ontity:
Alan Jelman Corporate Coursel
(Typed or Printed Name) (Capacity)

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