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BISCAYNE CENTRE • SUITE 503 11900 Biscayne Boulevard Miami, FLORIDA 33181

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TELEPHONE (305) 866-6434 FACSIMILE (305) 866-7159

January 2, 2002

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Change of Registered Office.

500004750605---S -01/04/02--01014--011 ****280.00 ****35.00

Re: Advanced Product Design, Inc.; Bestway Travel & Convention, Inc.; Blata USA Corp.; Developers Depot, Inc.; Eva Enterprises, Inc.; GCBM Global, Inc.; Prosys Information Systems, Inc.; The Seneca Corporation;

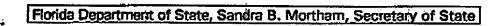
Dear sir or madam:

I enclose my trust account check in the amount of \$280.00 payable to the Division of Corporations to file the Statement of Change of Registered Office for the above referenced corporations.

Very truly yours,

LMS:jd Enc.

2 JAN - 3 PM 6: 05 R. A. Office 1-10-2002



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 Florida 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: _ADVANCED PRODUCT DESIGN, INC. 1b. The mailing address of the corporation is: __200 SE 15 ROAD #16C MIAMI FL 33129 1c. Date of incorporation: ,11/05/1998 Document number: P98000093784. The name and address of the current registered agent and office: SMITH, LINDA M., ESO 11900 Biscayne Blvd., Suite 200 Miami, FL 33181 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) $_{\rm SMITH},~{\rm LINDA~M.,~ESQ.}$ 11900 Biscayne Blvd., Suite 503 Miami, FL 33181 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. 11/21/01 (Date) Patrick Murphy, President (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, Thereby accept the appointment as registered agent and agree to actin 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. (Signature of Registered Agent) (Date) If signing on behalf of an entity: (Typed or Printed Name)

Division of Corporations, P.O. Box 6327, Tallahasses, FL 32314

FILING FEE: \$35.00

CR2E045(11/94)