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SECRETARY OF STATE
TALLAHASSEE FLORING



COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: A-1 NETWORK FROND CONF (Name of Corporation)			
DOCUMENT NUMBER: P9900004423			
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:			
LUIZ JAYME CORDEILS (Name of Contact Person)			
A-1 NETWORK FRADING CORP (Firm/Company)			
13937 SW 8/# SF (Address)			
MIAMI FL 33183 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Name of Contact Person) at (305) 458 41 43 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: A-1 NETWORK TRADING CORP.
2. The principal office address: 13937 5W SY 5F
MAMI FN 33183
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 01/14/99 Document number: 1990000 4423
5. The name and street address of the current registered agent and registered office on file with the Fiorida Department of State:
13937 SW 84 SF PEC 8
-
MAN FL 33/83 ASS
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
139375W845f
MAMI FR 33/83
(P.O. Box NOT acceptable)
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, or the corporation has been notified in writing of the change.
Horsleng Curduio Rosileus Conderdo VI (Signature of an officer or director) (Printed or typed name and title)
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.
04/18/06
Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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