

P99000009979

STEEL HECTOR & DAVIS LLP  
Requestor's Name  
215 S. MONROE ST. SUITE 601  
Address  
TALLAHASSEE 32301 222.2300  
City/State/Zip Phone #

Office Use Only

FILED  
2001 OCT -3 AM 10:47.  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. DOSAL MARKETING CORPORATION P99000009979  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 3:00 ☐ Certified Copy  
☐ Mail out ☐ Will wait ☒ Photocopy ☐ Certificate of Status

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DIVISION OF CORPORATION

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
XX	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

400004621114--6  
-10/03/01--01001--016  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

IF YOU HAVE ANY QUESTIONS  
REGARDING FILING PLEASE  
CONTACT ELIZABETH AT 222.2300.  
THANK YOU.

G. Coullatta OCT 03 2001

Examiner's Initials

**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.

1. The name of the corporation : DOSAL MARKETING CORPORATION

2. The mailing address of the corporation : 4775 N.W. 132 Street  
Opa Locka, FL 33054

3. Date of incorporation/qualification: 02/01/1999 Document number: P99000009

4. The name and address of the current registered agent and office:

RAUL M. SAENZ  
8180 N.W. 36 STREET, #100  
MIAMI FL 33166

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

MARGARITA D. OWEN  
4775 N.W. 132 STREET  
OPA LOCKA FL 33054

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.

(Signature of an officer, chairman or vice chairman of the board)

9/28/01  
(Date)

Margarita D. Owen / President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

9/28/01  
(Date)

If signing on behalf of an entity:

Margarita D. Owen President  
(Typed or Printed Name) (Capacity)

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