

Division of Corporations PO Box 6327 Tallahassee, FL 32314 200003943872--4 -04/02/01--01125--012 *****35.00 *****35.00

IPPweb@netscape.net

Dear Sirs,

Attached is the Change of Registered Agent Form as I will be handling IPP instead of my father, Carlos Moser, starting 4/1/01.

The address of the Corporation has changed and I would like to know how to update your records with the new address. Is there another form, another charge?

Please let me know. Thank you for your assistance.

Ana Moser

VP of Sales

FILED OI APR -2 PM 3: 56 SECRETARY OF STATE

RA. change

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: IPP INTERNATIONAL PRODUCTS, CORP.
2. The mailing address of the corporation: 600 ROTH CT SE
Paum Bay, Fi 32909
3. Date of incorporation/qualification: 3/24/99 Document number: P9000037208
4. The name and address of the current registered agent and office:
CARLOS MOSER
12136 ST ANDROWS PL = 305
MIRAMAR, FL 33005
5. The name and address of the new registered agent (if changed) and/or registered office (if changed). (P. O. Box Not Acceptable)
ANA MOSER
620 ROTH CT SE 7 New business
PALM CAY, To 32909 location
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) (Date)
CARLOS MOSER - 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.
Abon
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
ANA MOSER UP
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

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