

P9900030066

(Requestor's Name)

(Address)

(Address)

(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



600144360876

02/26/09--01013--011 **35.00

FILED

2009 FEB 26 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA
Chen
JL

2-27-09

LAW OFFICES
MARK PERLMAN, P.A.
1820 EAST HALLANDALE BEACH BOULEVARD
HALLANDALE BEACH, FLORIDA 33009

MARK PERLMAN*

*ALSO ADMITTED IN NEW YORK

TELEPHONE (954) 456-1333
FACSIMILE (954) 454-5081

February 24, 2009

Amendment Secretion
Florida Division of Corporations
P. O. Box 6327
Tallahassee, Florida, 32314

RE: TER PRINTS USA, INC.
Document No. P99000030066

To Whom it May Concern:

Please find enclosed herein Miami Offset Check No. 17551, payable to the Department of State in the amount of \$35.00, representing your fee for change of resident agent for the above corporation.

Also enclosed is the Cover Letter and Statement of Change of Registered Agent for Ter Prints USA, Inc., to Mark Perlman., 1820 East Hallandale Beach Boulevard, Hallandale Beach, Florida, 33009.

Please send verification of the change to my office in the enclosed self-addressed envelope.

Your anticipated cooperation in this matter is greatly appreciated.

Very truly yours,



MARK PERLMAN, P. A.
Kla
Enclosures

N:\Network\LETTERS\Ter Prints-Corp. Res.Agent chge..doc

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TER PRINTS USA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P99000030066

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:

MARK PERLMAN, ESQ.
(Name of Contact Person)

MARK PERLMAN, P. A.
(Firm/Company)

1820 East Hallandale Beach Boulevard
(Address)

Hallandale Beach, Florida, 33009
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Perlman at (954) 456-1333
(Name of Contact Person) (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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: TER PRINTS USA, INC.
2. The principal office address: 13301 N. W. 38th Court
Opa Locka, Florida, 33054
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 04/01/1999 Document number: P99000030066
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

DEBBIE L. THOMAS

13301 N. W. 38th Court

Opa Locka, Florida, 33054 (resigned)

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MARK PERLMAN, ESQ.

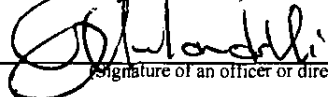
1820 East Hallandale Beach Boulevard

(P.O. Box NOT acceptable)

Hallandale Beach, Florida, 33009


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.


(Signature of an officer or director)

GUY KURLANDSKI, SEC'Y
(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.


(Signature of Registered Agent)

2/20/09
(Date)

If signing on behalf of an entity:

MARK PERLMAN

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

FILED
2009 FEB 26 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA