P99000034346

(Requestor's Name)
(Address)
(Address)
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, ,
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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SULFERNAY OF STATE
AUGA ASSEE, FLORIDA

R.A. Change

Iurillo & Associates, P.A.

ATTORNEYS AND COUNSELORS AT LAW

Sterling Square 600 First Avenue North, Suite 308 St. Petersburg, Florida 33701 Telephone (727) 895-8050 Facsimile (727) 895-8057

January 21, 2005

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

RE: Statement of Change of Registered Office or Registered Agent or Both for Corporations - Direct Design Tools, Inc.

Dear Sir or Madam:

Enclosed for filing on behalf of Florida Custom Mold, Inc. is its Statement of Change of Registered Office or Registered Agent or Both for Corporations, together with a copy of the same, a self-addressed stamped, envelope and the filing fee in the amount of \$35.00.

Please return a stamped copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations in the enclosed self-addressed, stamped envelope.

If you have any questions or require additional information, please do not hesitate to contact me.

Sincerely,

Sabrina C. Beavens

SCB ENCLOSURES

cc:

Mike Cave (w/o enclosures)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ingressive submitted for a corporation organized under the laws of the State of Florida
in orde	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Direct Design Tools, Inc.
2. The principal	office address: 2000 Calumet Street, Clearwater, FL 33765
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 4/14/1999 Document number: P99000034346
	I street address of the current registered agent and registered office on file with the timent of State:
	Michael A. Cave
	2000 Calumet Street
	2000 Calumet Street Clearwater, FL 33765 Street address of the new registered agent (if changed) and /or registered office
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Michael A. Cave
	1806 Gunn Highway
	(P.O. Box NOT acceptable)
	Odessa, FL 33556
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
(Signato	Michael A. Cave, President (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is bel corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this and filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
Who	1-14-05
(Sig	gnature of Registered Agent) (Date)
If signing on be	half of an entity:
MICHAER	A. CAVE
	Typed or Printed Name)

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