

P99000039575

Antigua Distribution, Inc

7819 W Flagler St # 399

Miami, FL 33144

Florida Department of State

Division of Corporations

409 East Gaines Street

Tallahassee, FL 32399

Please, note the new address for Antigua Distribution, Inc. , Document
Number P99000039575.

Old Address:

14188 SW 139 CT

Miami, FL 33186

600003053296--8

-11/23/99--01066--004

*****35.00 *****35.00

New Address:

7891 W Flagler ST # 399

Miami, FL 33144



Irasema Cabanas

President

Antigua Distribution, Inc.

RTA Change
12-3-99
DHS

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

99 NOV 23 PM 12:59

FILED

**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 is: ANTIGUA DISTRIBUTION, INC.

2. The mailing address of the corporation is: 14188 SW 139 CT
MIAMI, FL 33186

3. Date of incorporation/qualification: 05/03/1999 Document number: P99000039575

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

IRASEMA CABANAS
14188 SW 139 CT
MIAMI, FL 33186

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

IRASEMA CABANAS
7891 W FLAGLER ST #399
MIAMI FL 33144

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TALLAHASSEE, FLORIDA

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)

11/22/99
(Date)

IRASEMA CABANAS / 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)

11/22/99
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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