

P99 0000 482 75

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: P&LR CONSTRUCTION, INC.  
(Name of corporation)

DOCUMENT NUMBER: P 99 0000 482 75

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:

PETER D. LEE LUM  
(Name of contact person)

P&LR CONSTRUCTION, INC  
(Firm/Company)

P.O. BOX 770085  
(Address)

CORAL SPRINGS, FL 33077/0085.  
(City/state and zip code)

For further information concerning this matter, please call:

PETER D. LEE LUM. at (954) 818 1765  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**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: P&LR CONSTRUCTION, INC  
2. The principal office address: PO BOX 770085, CORAL SPRINGS  
FLORIDA 33077/0085  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: MAY 24 1999 Document number: P99 0000 482 75  
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

PETER D. LEE LUM  
642 N.W. 113 TERR.  
CORAL SPRINGS, FL 33307

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

5453 - 2 NW 24 ST  
MARGATE FL 33063

(P.O. Box NOT acceptable)

OFFICE OF THE  
CLERK OF THE  
FLORIDA DEPARTMENT OF  
STATE  
TALLAHASSEE, FLORIDA

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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] (Signature of an officer or director) PETER D. LEE LUM, PRESIDENT (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] (Signature of Registered Agent) JAN 27 2005 (Date)

If signing on behalf of an entity:  
PETER D. LEE LUM  
(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