## P99000054592

(Requestor's Name)
(Address)
(Address)
•
(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
,
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only

Registered office change



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SECRETARY OF STATE
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

AMT GROUP INC	
SUBJECT: AMT GROUP, INC.  (Name of Corp.)	poration)
DOCUMENT NUMBER: P99000054592	
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Daniel A. Harris	
(Name of Conta	ect Person)
Daniel A. Harris, PA	•
(Firm/Com	pany)
3937 Tampa Road, Suite 2 (Addres	ss)
Oldsmar, Florida 34677	
(City/State and	Zip Code)
For further information concerning this matter, please call	1:
Daniel A. Harris	at (813 ) 814-0665 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departme	ent 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: AMT GROUP, INC.
, ,	office address: 4560 53rd Avenue North urg, FL 33714
3. The mailing a	address (if different): P.O. Box 60097 rg, FL 33784
4. Date of incorp	poration/qualification: 06/15/1999 Document number: P99000054592
	d street address of the current registered agent and registered office on file with the rtment of State:
	Harris, Daniel A.
	105 F Dunbar Avenue
	105 F Dunbar Avenue  Oldsmar, Florida 34677 US  TALLAHAR  ASEC ARE TARE  ASEC ARE TARE  ASEC ARE TARE  ASEC ARE TARE  TASE  TALLAH  ASEC ARE  TASE  TA
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office  Harris, Daniel A.
	Harris, Daniel A.
	3937 Tampa Road, Suite 2
	(P.O. Box NOT acceptable)
	Oldsmar, Florida 34677
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
(Signatu	ure of an officer or director) (Printed or typed name and title)
I hereby accept I further agree to of my duties, and occument is heice corporation has (St	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 ing filed merely to reflect a change in the registered office address, I hereby confirm that the special position of this change.  CLACO  Emittine of Redistance Agent)  (Date)
Daniel	Phalf of an entity:  A - Vern?  Typed or Printed Name)

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