P99000055471

4549 SNOWY EGRACT. NAPLES, FL 34119

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

2	1	
(Corporation Name) (Corpo	(Corporation Name)	(Document #)
(Corporation Name) (Corpo	(Corporation Name)	,
Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director Resignation of Registered Agent Dissolution/Withdrawal Other Other Merger Apparel Research	(Corporation Name)	1017 147 00 01013 005 *****35.80 *****35.80 (Document #)
Fictitious Name Fictitious Name Limited Partnership Reinstatement Trademark	Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report	Certified Copy Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement

CR2E031(7/97)

Examiner's Initials

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

	e provisions of sections 607.050 orporation organized under the l		•••)8, Florida Statute.	s, the
submits the foll	lowing statement in order to cha	•		ed agent, or both, i	in the
State of Florida	n. Tthe corporation: <u>EN 5166</u>		1.1		
1. The name of	the corporation: $\angle N5/66$	T IECHNOL	GIES, INC		<u>. </u>
2. The mailing	address of the corporation: 33	300 S. CGN	cness Aue	, STE.14	
3. Date of inco	orporation/qualification: _ < / /	8/1999 Do	ocument number	r: <u>P9900005</u>	5471
4. The name an	d address of the current registere	ed agent and registe	red office:		
	SHREVE, WE	slev.5		esperie ;	
	1194 17 rus Boi	•	, ,		
	HILLSBORD BE			<u> </u>	
5. The name an	d address of the new registered a	gent (if changed) a	nd/or registered	office (if changed	
	KANAR , N	NELVIN I			
	4549 SNO	VY EGAST	CT.	3; 2; 57A 1.0R	
	NAPLES F	VY EGRET L 34119	<u> </u>		
The street addragent, as change	ress of its registered office and ged, will be identical.				ered
Such change wathorized by t	vas authorized by resolution du the board.	ly adopted by its b	oard of director	rs or by an officer	so
C Dee	PRESIDE	7		7/11/2000	
	of an officer, chairman or vice chairma	n of the board)		(Date)	
MeLvi	NTKANAR Puls (Printed or typed name and title)	TDEN			
Having been na corporation, I I further agree performance of registered ager	amed as registered agent and to hereby accept the appointment to comply with the provisions of f my duties, and I am familiar v	o accept service of as registered ager of all statutes relai with and accept the	f process for the nt and agree to tive to the prope e obligation of t	e above stated act in this capacit er and complete my position as	'y.
lege			2/11/2	200 0	
()	Signature of Registered Agent)		(Daté)	· · · · · · · · · · · · · · · · · · ·	
If signing on beha		•	9/11/2 (Date) Presion	T	
Melvi	T. (AWA). (Typed or Printed Name)		TRESIDA (Capacit	<u>vy</u>	
,	·		(F		

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