

510349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

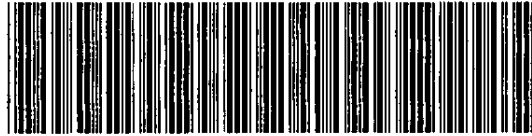
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
TALLAHASSEE, FLORIDA

RAOY
5/13/10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2010

EDWIN CABRERA
1160 NW 163RD DRIVE
MIAMI, FL 33169

SUBJECT: NEWTECH ELECTRONICS INDUSTRIES, INC.
Ref. Number: S10349

We have received your document for NEWTECH ELECTRONICS INDUSTRIES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 310A00010923

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEWTECH ELECTRONICS INDUSTRIES, INC.
Name of Corporation

DOCUMENT NUMBER: S10349

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:

EDWIN A. CABRERA

Name of Contact Person

NEWTECH ELECTRONICS INDUSTRIES, INC.

Firm/Company

1160 NW 163rd DRIVE

Address

MIAMI, FLORIDA 33169

City/State and Zip Code

ecabrera@craigelectronics.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWIN A. CABRERA

Name of Contact Person

at (305) 622-9505, EXT 215
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: NEWTECH ELECTRONICS INDUSTRIES, INC.
2. The principal office address: 1160 NW 163rd DRIVE, MIAMI FLORIDA 33169

3. The mailing address (if different): _____

4. Date of incorporation/qualification: October 25, 2010 Document number: S10349

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301

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

JOEL NEWMAN

1160 NW 163rd DRIVE

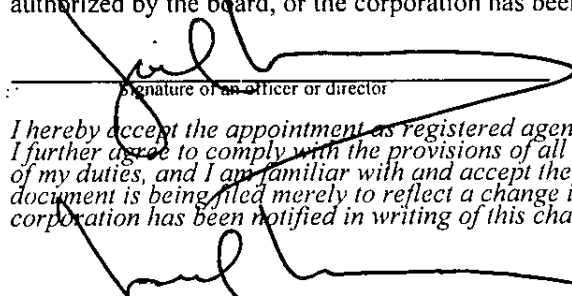
P.O. Box NOT acceptable

MIAMI, FLORIDA 33169

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SECRETARY OF STATE
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, or the corporation has been notified in writing of the change.

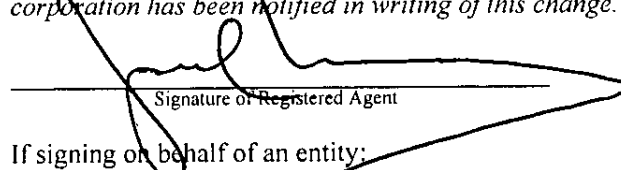


Signature of an officer or director

JOEL NEWMAN, 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 of Registered Agent

MAY 6, 2010

Date

If signing on behalf of an entity:

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

CR2IE045 (8/05)