## Specialty Contractors, Inc. Phone # \*\*\*\*\*70.00 \*\*\*\*\*35.00 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time ■ Walk in Certificate of Status ☐ Will wait Photocopy Mail out **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS Foreign Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)

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

			)502, 617.0502, r the laws of the		- 617.1508, FLOR		tatutes,	
•	lowing statemen	•	hange its registe	· —			both, in	**** 7 **
		: P &	R SPECIALT	TY CONTRA	ACTORS,	INC.	<u>,</u>	<del></del>
2. The mailing	address of the c	· •	2331 N	66th TEF	RR			
			. , —					<u> </u>
•			2/27/1991		number:	S34332		<u> </u>
4. The name an	d address of the	current registe	ered agent and of	ffice:				
-		RIDEL LI	NARES		-	_		
		2331 N 6	6th TERR			-	9	2 
		HOLLYWOO	D, FL 3302	4	-	-	NO.	255 255
5. The name an	d address of the		d agent (if chang Box <b>Not</b> Accepta		gistered offi	ce (if chan	ıged): S	
		PABLO LO	PEZ					~ 유유 -
		1601 N 7	4th TERR		- -		1.0	
		HOLLYWOO	D, FL 3302	4			<b>U</b> , 7	<u>.</u>
The street addragent, as chang	ess of its registe ed, will be iden	ered office and tical.	the street addre	ess of the bus	iness office	of its regi	stered	ŧ
Such change wauthorized by the	as authorized by he board.	y resolution du	ıly adopted by it	ts board of di	rectors or b	y an office	er so	
- Cull	of an officer, chairm		· ·		10/10	1/01	<del></del>	
(Signature	of an officer, chairm	an or vice chairma	n or the board)		/(Date	).		
RIDEL	LINARES (Printed or type	PRESIDE: ed name and title)	NT	<del></del> +	- m· •	-		* 50
Having been no corporation, I h I further agree performance of registered agen	hereby accept th to comply with fmy duties, and	red agent and ne appointmen the provisions I am familiar	to accept service t as registered a of all statutes r with and accept	e of process j igent and agr elative to the t the obligation	for the above tee to act in proper and on of my po	e stated this capad complete sition as	city.	
Pill	) W				10/191	/		
(S	Signature of Register	ed Agent)	···	(Dai	te)	<u> </u>	_	
If signing on behal		oPEZ		-				
(	Typed or Printed Na	me)	*	(0	Capacity)	· · · · · · · · ·		. 12,

CR2E045(9/00)

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