569017

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TRANSMITTAL LETTER

-	TO: Amendment Section Division of Corporations SUBJECT: GOBAL FIRM OF CORPORATION					
	DOCUMENT NUMBER: \$ 69017					
	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:					
w Pag	(Name of firm/company)					
	2400 E. LAS QLIAS BLUB., #261, (Address)					
	Ft-LAUSENDA 16, 15/08: DA 33301 (City/state and zip code)					
	For further information concerning this matter, please call:					
	EUGURU 17.050 at (954) 328-2466 (Name of 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

4 g 32 g

		ections 607.0502, 6			
this statement of	change is submit in order to	itted for a corporati change its registe	ion organized und wad office or ver	ler the laws of th	e State of
of Florida					
1. The name of the	ne corporation:_	Colobbi 2400 E	FINAU	eine, ja	se.
2. The principal of	office address:	2400 E	. LAS DLA	S BLUD.	, #261,
					A 33301
3. The mailing ad	dress (if differer			, ··	
<u> </u>					
4. Date of incorpo	oration/qualifica	tion: <u>7-28</u>	- 1991 Docum	nent number:	569017
5. The name and Florida Departs		f the current register	red agent and reg	istered office on	file with the
_		EVECUC	A. OSC		
		124 s.	E. 179 1	fue,	
		1=+-L	HUSEKDA	le . 17/0/	184 33301
6. The name and changed):		of the new register	red agent (if char		
		eve A-c			· ·
	2400	(P.O. Box or personal ma	OLUS /	JLVD. #	261,
Wes	Ft-L	Auberbal	c, Flo A	'SA 333	01
The street addres	s of its registere /will be identic	ed office and the stral.	reet address of th	e business office	of its registered
Such change was authorized by the	authorized by r board, or the	Solution dub ado progration has been	pted by its board a notified in writ	of directors or t ing of the change	oy an officer so 品。
(Signature of an officer, o			EVG e)	が typed name and title)	C (3)
performance of n registered agent office address, I	ocomply with the syduties, and I comply with the syduties, and I comply the sydute of	as registered agen te provisions of all am familiar with a umpit is being filed that the porporatio	t and agree to ac statutes relative nd accept the ob I merely to reflec n has been notifi	et in this capacity to the proper an ligation of my po	d complete I
	nature of Registered Ag	ent)		(Date)	
If signing on behalf	of an entity:				
(Ту	ped or Printed Name)			(Capacity)	

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