

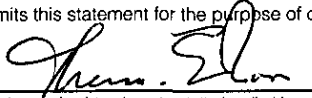
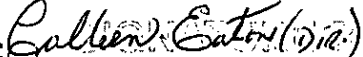
FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90383 036 ***158.75

A0017815



DO NOT WRITE IN THIS SPACE

DOCUMENT # V51145			
1. Entity Name			
COLDAR HOLDINGS CORP.			
Principal Place of Business		Mailing Address	
2113 HELM PLACE WHISTLER BC VON1B US		2113 HELM PLACE WHISTLER BC VON1B US	
2. Principal Place of Business		3. Mailing Address	
5811 Westlake Dr.		5811 Westlake Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
New Port RICHEY		New Port RICHEY	
Zip	Country	Zip	Country
34653	U.S.A	34653	U.S.A
6. Name and Address of Current Registered Agent			
EATON, ALLAN % ALLAN EATON ASSOC. 10 MOUNTAIN LAUREL RD., BLUE JAY ESTATES PALM HARBOR FL 34683			Name
			Street Address
			City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.			
SIGNATURE 			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)			
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS			
TITLE	V	<input type="checkbox"/> Delete	
NAME	EATON, COLLEEN		
STREET ADDRESS	10 MOUNTAIN LAUREL RD.		
CITY-ST-ZIP	PALM HARBOR FL		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
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12.			
TITLE			
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TITLE			
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STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 101.1 of the Florida Statutes, Chapter 601, F.S., and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 601, F.S., changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  (Agent)			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			