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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: IMPERIAL PACKERS AND PURVEYORS, INC.

(Name of Corporation)

DOCUMENT NUMBER: V51979

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:

CAROLINE LABAUVE

(Name of Contact Person)

IMPERIAL PACKERS AND PURVEYORS, INC.

(Firm/Company)

1430 EAST MOWRY DRIVE

(Address)

HOMESTEAD, FL 33033

(City/State and Zip Code)

For further information concerning this matter, please call:

 ROBERT CUIK
 at (305)
 245-4495

 (Name of Contact 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

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

1. The name of the corporation: IMPERIAL PACKERS AND PURVEYORS, INC.

2. The principal office address: 396 SW 3 STREET, FLORIDA CITY, FL 33034

3. The mailing address (if different): PO BOX 900940, HOMESTEAD, FL 33090

- 4. Date of incorporation/qualification: 07/20/1992 Document number: V51979
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CAROLINE LABAUVE - IMPERIAL PACKERS AND PURVEYORS INC.

1430 EAST MOWRY DRIVE

HOMESTEAD, FL 33033

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

CAROLINE LABAUVE - IMPERIAL PACKERS AND PURVEYORS, INC

396 SW 3 STREET

(P.O. Box NOT acceptable)

FLORIDA CITY, FL 33034

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 directe

ROBERT CUIK - EXEC. VICE PRES. (Printed or typed name and title)

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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)

07/20/2007

(Date)

If signing on behalf of an entity:

ROBERT CUIK

(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

CR2E045 (8/05)