

842187

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Requestor's Name  
 See next pg.  
 Address  
 City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 600002465746--6  
 -03/24/98--01008--001  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

98 MAR 24 PM 2:15  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- Walk in       Pick up time \_\_\_\_\_       Certified Copy
- Mail out       Will wait       Photocopy       Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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VS MAR 26 1998

Examiner's Initials	
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CT CORPORATION SYSTEM

1633 Broadway  
New York, NY 10019  
Tel. 212 246 5070

March 19, 1998

RE: DAWSON'S, THE YOGURT PLACE, LAFAYETTE PLACE,  
INC. (FL. DOM.)  
DAYLIGHT INDUSTRIES, (DE. DOM.)  
DEAUVILLE LANE EQUITIES, INC. (FL. DOM.)  
DES PERES FINANCIAL CORP. (MO. DOM.)

Secretary of State  
Corporate Records Bureau  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Fl. 32399

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed are 4 checks in the amount of \$35.00 each to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self-addressed envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri  
Senior Supervisor

TA:lk  
enclosure



Florida Department of State, Jim Smith, Secretary of State

FILED  
98 MAR 24 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes, the

undersigned, C T CORPORATION SYSTEM hereby resigns as  
(name of registered agent)

Registered Agent for DES PERES FINANCIAL CORP.  
(name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF MISSOURI

A copy of this resignation was mailed to the above listed corporation at its last known address.

c/o Ziercher & Hocker, 231 S. Bemiston, 8th. floor  
St. Louis, Mo. 63105, Att: Steven W. Koslovsky

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.

*Theresa Alfieri*  
SIGNATURE  
ASSISTANT SECRETARY

**FEE FOR FILING THIS DOCUMENT:**  
**\$87.50-Active Corporation**  
**\$35.00-Administratively Dissolved Corporation**