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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Aqean Enterprise Limited Partnership  
(Name of Limited Partnership)

**FLORIDA REGISTRATION NUMBER:** 501A0100001334

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Georgia Laousis  
(Name of Person)

(Firm/Company)

5557 SeaForest Drive, #210  
(Address)

New Port Richey, FL 34652  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Georgia Laousis at ( 727 ) 815-0533  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee
- \$61.25 Filing Fee & Certificate of Status
- \$105.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**CERTIFICATE OF CANCELLATION  
FOR**

Aqean Enterprise Limited Partnership  
(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this Certificate of Cancellation in order to cancel its registration with the Florida Department of State.

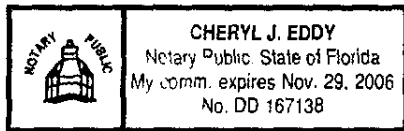
Georgia Laouisis  
(Signature of a General Partner)

Georgia Laouisis  
(Typed or Printed name of General Partner Signing Above)

STATE OF FLORIDA  
COUNTY OF PASCO

On this 30<sup>th</sup> day of September, 2004,  
personally appeared before me,

who is personally known to me  
 whose identity I proved on the basis of FL D.L.



Cheryl J. Eddy  
Notary Public Signature

\_\_\_\_\_  
Notary's Printed Name

Seal

My Commission Expires: \_\_\_\_\_