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(Re	questor's Name)	
(Adı	dress)	
(Ade	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
, (Bus	siness Entity Nar	ne)
(Doe	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STALC
TALLAHASSEE, FLORIDA

APPROYEU AND FILED

C. Goulliette JUN 0 8 2007

May 30, 2007

21. Y .

RE: SEBRING CAPITAL CORPORATION (DE. DOM.)
UNITED PRESCRIPTION SERVICES, INC. (FL. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$175.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60)7.0502(2), 617.0502(2), 607.1509, or 61°	7.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
, ,	(Name of Registered Agent)	
hereby resigns as Registered Agent for	SEBRING CAPITAL CORPORATION (E	DE. DOM.)
nereby resigns as Registered Agent for	(Name of Corporation)	,
F02000000710		
(Document Number, if known)	_	
A copy of this resignation was mailed to	the above listed corporation at its last kn	own address.
this statement is filed.	discontinued on the 31st day after the date	e on which
If signing on behalf of an entity:	mature of Jessening regent)	O7 J SECH TALLA
C T CORPORAT	ION SYSTEM - THERESA ALFIERI	AUUN ARETI AHA
	Typed or Printed Name)	APR FIL FIL ARY ASSE
ASS	SISTANT SECRETARY	AH 8: E. Flore
	(Capacity)	25 27 27 20 27

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314