

F99000003972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

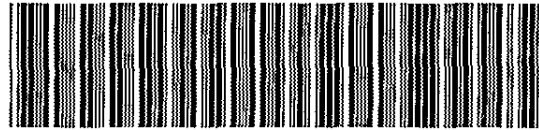
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/20/03--01020--003 **105.00

FILED
STATE
ALABAMA, FLORIDA

03 FEB 20 PM 3:52

FILED

2/20/03 10:00 AM

CT CORPORATION

February 13, 2003

RE: CIRRUS AIR INTERNATIONAL INC. (NV. DOM.)
CRITICAL CARE CONCEPT, INC. (DE. DOM.)
HIT OR MISS, INC. (DE. DOM.)

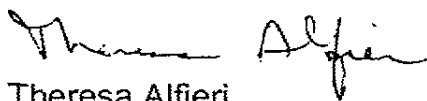
Secretary of State
Corporate Records Bureau
Division of Corporation
109 East Gaines Street
Tallahassee, Florida 32399

Dear Sir:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 check in the amount of \$105.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM



Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA: il
enclosure

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RESIGNATION OF REGISTERED AGENT DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, C T CORPORATION SYSTEM

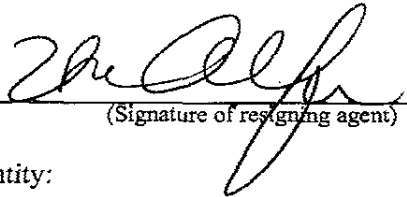
(Name of registered agent)

hereby resigns as Registered Agent for CRITICAL CARE CONCEPT, INC. (DE. DOM.)

(Name of corporation)

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

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


(Signature of resigning agent)

If signing on behalf of an entity:

C T CORPORATION SYSTEM - Theresa Alfieri
(Typed or Printed Name)

ASSISTANT SECRETARY
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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