



State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE
DATE NUMBER

04/03/2001 103861

DEBIT MEMORANDUM

To: DEPARTMENT OF STATE

P 01000028945

General Revenue Total 0.00
Trust Total 2,018.25
Other Total 0.00
Total \$2,018.25

400004217524-6

Distribution

Cross Ref	Samas Code	Reason	Amount
008	45-20-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	8.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	60.00
008	45-20-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	70.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	72.00
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	78.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	78.75
008	45-20-2-130001-45300100-00-000100-00	INSUFFICIENT FUNDS	150.00
008	45-20-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	150.00
008	45-20-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	150.00
008	45-20-2-130001-45300100-00-000100-00	OTHER	300.00
008	45-20-2-130001-45300100-00-000100-00	ACCOUNT CLOSED	900.00

Grand Total: \$2,018.25

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Process Date: 03/22/2001

State Treasurer

BUREAU OF
PLANNING, BUDGET AND
FINANCIAL SERVICES

01 APR -5 PM 1:25
RECEIVED

30

TONY GAUDIOSO LMHC & ASSOCIATES, PA

305-754-0377
146 N.E. 98 STREET
MIAMI SHORES, FL 33138

01-01

G 1015

PAY TO THE ORDER OF

DATE

3/13/01

63-27/631 FL 688

Bank of America

ACH RT 063100277



FOR *for year in Employee withdrawal Tony Gaudioso*

⑈001015⑈ ⑈063100277⑈ 003737843317⑈

⑈0000007875⑈

INSUFFICIENT FUNDS

DOLLARS

\$ 78.25



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

May 15, 2001

Tony Gaudio LMHC & Associates PA
146 NE 98 St.
Miami Shores, FL 33138

SUBJECT: EMPOWERMENT SOURCE, INC.
Ref. Number: P01000028945

Debit Memo #: 13861-G

This is to inform you that your check #1015 dated March 13, 2001 in the amount of \$78.75 and submitted for EMPOWERMENT SOURCE, INC. has been returned to us by your bank because of Insufficient Funds.

We request that you remit a cashier's check or money order in amount of \$93.75 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(850) 487-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 801A00021759

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 25, 2001

Tony Gaudioso LMHC & Associates PA
146 NE 98 St.
Miami Shores, FL 33138

SUBJECT: EMPOWERMENT SOURCE, INC.
Ref. Number: P01000028945

Debit Memo #: 13861-G

Due to your failure to respond to our previous letter advising you of the returned check #1015, the Articles of Incorporation for EMPOWERMENT SOURCE, INC. have been cancelled and are considered not filed as of June 25, 2001.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 901A00038362

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314