

PD1000031312

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2004 AUG 13 PM 2:52
TALLAHASSEE, FLORIDA

C. Ouedjette AUG 16 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL 4 U Inc
(Name of Corporation)

DOCUMENT NUMBER: P01000031312

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Riyad Malkeya
(Name of Person)

(Name of Firm/Company)

515 Pine wood Dr
(Address)

Oldsmar, FL 34677
(City/State and Zip Code)

For further information concerning this matter, please call:

Riyad Malkeya at (813) 818-9684
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 14, 2004

RIYAD MALKEYER
515 PINWOOD DR.
OLDSMAR, FL 34677

SUBJECT: ALL 4 U, INC.
Ref. Number: P01000031312

We have received your document for ALL 4 U, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$52.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 504A00044872

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

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

Florida Statutes, the undersigned, Riyad Malker
(Name of Registered Agent)

hereby resigns as Registered Agent for ALL 4 U Inc
(Name of Corporation)

P01000031312
(Document Number, if known)

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.

Riyad Malker
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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TALLAHASSEE, FLORIDA

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