P02000010627

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
•	,	
(0)	t. (Ct-t-/7:- ID)	(6)
(CI	ty/State/Zip/Phone	7)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name	<u> </u>
(•
(0-		
(DC	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer	
	r ming onlock	
		j
		j
		ĺ
		İ

Office Use Only



700018936387

05/21/03--01031--001 **87.50

2003 MAY 21 PH 2: 1

Charter Number Only

Honeque, S. Walker
Requestor's Name
8260 W. Flagter St. #IE
Address
Miami, FL 33144
City State ZIP Phone (305)485-955DF

CORPORATION(S) NAME

	L O
	-5
	5
	75
	<u> </u>
	7
	\vdash
	[o]]
· · · · · · · · · · · · · · · · · · ·	
	¥,
	Free:
	_
	င်္ဂ
	ğ
	۲
	43
	1-800-432-302
	ည်
)2
	∞

	-10	, , , , , , , , , , , , , , , , , , ,
METOPOLIS M	Ultimedia, Inc	•
·	·	
() Profit		
() NonProfit	() Amendment	() Merger
() Foreign	() Dissolution	() Mark
() Limited Partnership	() Annual Report	() Other
() Reinstatement	() Reservation	Change of Registered Agent
() Certified Copy	() Photo Copies	() Certificate Under Seal
() Call When Ready	() Call If Problem	() After 4:30
(V) Walk In () Wi	Il Walt (X) Pick Up	() Mail Out
Name		

<u></u>		
Name		
Availability		
Document		
Examiner		
Updater		
Verifier		
Acknowledgment		
M. D. Maria		

TRANSMITTAL LETTER

	Amendment Section Division of Corporations
	-
SUBJE	CT:_METROPOLIS MULTIMEDIA, INC.
	(Name of Corporation)
DOCU	MENT NUMBER: P02000010627
The enc	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
MONE	EQUE S. WALKER
	(Name of Person)
Mone	que S. Walker, P.A.
	(Name of Firm/Company)
8260	West Flagler Street, Suite 1E
	(Address)
Miami	, Florida 33144
	(City/State and Zip Code)
For furtl	her information concerning this matter, please call:
Moneo	ue S. Walker, Esq. at (305) 480-7772
	(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of se	ections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned	ed, Moneque S. Walker (Name of Registered Agent)
hereby resigns as Registered A	gent for Metropolis Multimedia, Inc. (Name of Corporation)
P0200010627	(Name of Corporation)
(Document Number, if know	vn)
A copy of this resignation was	mailed to the above listed corporation at its last known address.
The agency is terminated and this statement is filed.	he office discontinued on the 31st day after the date on which
You	Old S. Walkon (Signature of Resigning Agent)
If signing on behalf of an entity	S. Walker, Esquire
Moneque	S. Walker, Esquire
	(r)ben or r mass r mass
Resident /	
	(Capacity)

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