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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ALL DRO PERFORMANCE TRACE O TRACER, INC. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: MARY LAUSCH (Name of Person)
(Name of Firm/Company)
1411 INDIAN RIADE
WEST PALM BEACH FL 33406 (City/State and Zip Code)
For further information concerning this matter, please call:
MARY RAUSCH at (561) 707-8998 (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of State for \$87.50 for an active corpor \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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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 sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, MALY RAUSCH (Name of Registered Agent)	
	BUCK + TRAKER, INC.
DU0006 41 555 (Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	vn address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	on which
Mary Flaush (Signature of Resigning Agent)	FIL APR 29
If signing on behalf of an entity:	AN ID: 15
(Typed or Printed Name)	
(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Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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