P04000094303

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	state/Zip/Phon	e #)
PICK-UP		MAIL
(Busir	ess Entity Nar	me)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

÷

Office Use Only



10/07/04--01056--025 **87.50







UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

...

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

October 7, 2004

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Lure Cafe, Inc.

Filing Evidence

Plain/Confirmation Copy

Retrieval Request

 \Box Certified Copy

Type of Document

□ Certificate of Status

- □ Certificate of Good Standing
- \Box Articles Only
- □ All Charter Documents to Include Articles & Amendments
- □ Fictitious Name Certificate
- □ Other

NEW FILINGS
Profit
Non Profit
Limited Liability
Domestication
Other

□ Photocopy

□ Certified Copy

OTHER FILINGS
Annual Reports
Fictitious Name
Name Reservation
Reinstatement

X RA Resignation

AMENDMENTS
Amendment
Resignation of RA Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

REGISTRATION/QUALIFICATION
Foreign
Limited Liability
Reinstatement
Trademark
Other

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

η

. ጠ

2

ပ္သ ခြ

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.15	09,SAR
Florida Statutes, the undersigned, SHALOM COHEN	
(Name of Registered Agent)	
hereby resigns as Registered Agent for LURE CAFE, INC.	
(Name of Corporation)	;

P04000094303

(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.

х Signature of Resigning Agent)

If signing on behalf of an entity:

SHALOM COHEN

(Typed or Printed Name)

INDIVIDUALLY

(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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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