

P06000126599

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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SECRETARY OF STATE
FAILLANASSEE FLORING

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COVER LETTER

Division of Corporations				
SUBJECT: EXPLOSIVE	Sounds & Vi	deo		
	(Name of Corporation)	1001	1. 1. 1	,

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:

CATHY Thomas

(Name of Person)

EXPLOSIVE So un DS & Video

(Name of Firm/Company)

124 TAHO CIRCLE

(Address)

VALRICO, FL 33594

(City/State and Zin Code)

Amendment Section

For further information concerning this matter, please call:

CATherine Thomas at (813) 654-8842 (Name of Person) at (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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, CATHERIVE THOMAS (Name of Registered Agent)
hereby resigns as Registered Agent for EXPLOSIVE Sounds & Video Inc. (Name of Corporation)
20-5655349 1810 S. PAR SONS AVE # 112 Seffner, FL 33584 PO6000126599
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.
Catherin Roman
(Signature of Resigning Agent)
If signing on behalf of an entity:
(Typed or Printed Name) ≥ □
(Conneity)
(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withdrawn corporation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