PO7000031443

| (Re | equestor's Name) | |
|---|--------------------|-----------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | : #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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RAResign

MAY 13 2014 T. CARTER

FLORIDA ANNUAL REPORT SERVICES, INC.

2300 Coral Way, Suite 200 Miami, Florida 33145 Phone (305) 856-0056 Fax (305) 856-2030

May 1, 2014

Mr. Sean Toner Division of Corporations 2661 Executive Center Circle Tallahassee, Fl. 32301

Re: Renewal Uniform Business Reports

Dear Mr. Toner:

Enclosed please find the following 2014 payment vouchers along with corresponding check for the below entity.

• Rey's Pizza Holdings Inc

Also, enclosed please find the following Resignation of Registered Agent for the below entities:

- Robbo Enterprises Inc
- The New City Medical Center Inc
- Continental Rehab Center Inc

Please do not hesitate to contact us if you should have any questions concerning any of the entities listed above.

Vivian Williams

President VW/bm Enclosure

COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: ROBBO ENTERPRISES, INC. (Name of Corporation) DOCUMENT NUMBER: P07000031443 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: VIVIAN WILLIAMS (Name of Person) FLORIDA ANNUAL REPORT SERVICES, INC (Name of Firm/Company) 2300 CORAL WAY MIAMI, FLORIDA 33145 (City/State and Zip Code) For further information concerning this matter, please call: **VIVIAN WILLIAMS**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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, FLORIDA ANNUAL REPORT SERVICES, INC |
| (Name of Registered Agent) |
| hereby resigns as Registered Agent for ROBBO ENTERPRISES, INC. |
| (Name of Corporation) |
| P07000031443 |
| (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. (Signature of Resigning Agent) |
| If signing on behalf of an entity: |
| VIVIAN WILLIAMS |
| (Typed or Printed Name) |
| |
| PRESIDENT 25 STA |
| (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