

P31105

CT Corp. System  
Requestor's Name

1633 Broadway  
Address

New York, NY 10019  
City/State/Zip Phone #

(212) 246-5070

500002162085--6  
-05/01/97--01076--004  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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 97 MAY -1 PM 2:47  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 SH 5/

Examiner's Initials	
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Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2) or 607.1509, Florida Statutes, the

undersigned, C T CORPORATION SYSTEM hereby resigns as (name of registered agent)

Registered Agent for TRACE SECURITY, INC. (name of corporation)

ORGANIZED UNDER THE LAWS OF THE STATE OF CALIFORNIA

A copy of this resignation was mailed to the above listed corporation at its last known address.

633 Lido Park Dr.
Newport Beach, Ca. 92660
Att: William Van Den Hurk

The agency is terminated and the office discontinued on the 31st day after the date on which the statement was filed.

Handwritten signature of Steve Alphin
SIGNATURE
ASSISTANT SECRETARY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEE FOR FILING THIS DOCUMENT:
\$87.50-Active Corporation
\$35.00-Administratively Dissolved Corporation