

P93000056735

By registered mail

November 24, 1999

Florida Division of Corporations  
Florida Department of State  
PO box 6327  
Tallahassee, Florida  
32314


300003065753--7  
-12/10/99--01001--001  
\*\*\*\*\*122.50 \*\*\*\*\*35.00

Re: Corporation : Tricor Service Corp  
120 International Parkway  
Suite 220  
Heathrow, Florida 32746

Effective today I resign as Registered Agent, Director and Officer of the above reference corporation. The FEI # for this corporation is 59-3197184.


Should there be any additional forms or fees required, please advise me.  
I wish this documented with your department.

Thank you

  
Barbara J. Abrass  
(407) 333-3335

PO Box 952018  
Lake Mary, Florida 32795

FILED  
99 DEC -9 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
T. LEWIS DEC 9 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 30, 1999

BARBARA J. ABRASS  
P. O. BOX 952018  
LAKE MARY, FL 32795

SUBJECT: TRICOR SERVICE CORP.  
Ref. Number: P93000056735

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

To file a resignation as an officer or director with this office, the enclosed form should be completed and returned with a filing fee of \$35 per person resigning.

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis  
Corporate Specialist Supervisor

Letter Number: 799A00056681



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**OFFICER / DIRECTOR RESIGNATION**

99 DEC -9 PM 2:02  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, BARBARA J. ABRASS, hereby resign as President  
(Title)

of Tricor Service Corp  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

[Signature]  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**