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70:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : REIMER & ROSENTHAL LLP

Account Number : T20000000101

; (954)384-9200

Fax Number

: (954)384-0017

REGISTERED AGENT RESIGNA

BDZ, INC.

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02
\$87.50

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Corporate Filing

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8/26/2004

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BDZ, INC.
(Name of Corporation)
DOCUMENT NUMBER: P94000017687
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:
Selena Castillo
(Name of Person)
BDZ, INC.
(Name of Firm/Company)
4960 SW 52nd Street, Suite 406
(Address)
Fort Lauderdale, FL 33314
(City/State and Zip Code)
For further information concerning this matter, please call:
Selena Castillo at (954) 769-7161
Selena Castillo at (954) 769-7161 (Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 409 E. Gaines Street Tallahassee, FL 32399

CR2E046(11/02)

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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, Alex P. Rosenthal			
(Name of Registered Agent)			******
hereby resigns as Registered Agent for BDZ, INC.			
(Name of Corporation)	 3	-	
P94000017687			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known address	i.		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.			
_ a. Rhl			w
(Signature of Resigning Agent)			
If signing on behalf of an entity:			
	SEC	04	
(Typed or Printed Name)	RETA	4 AUG 26	The state of the s
	RY O	6 PH	FILED
(Capacity)	F STATE FLORIDA	M 4: 55	

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