

P94000063746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

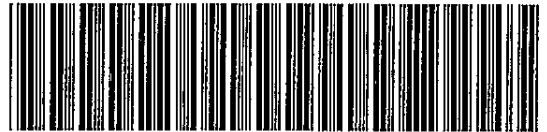
(Business Entity Name)

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DIVISION OF CORPORATIONS
2004 APR 15 PM 1:11

R. A. Resignation
LFB
4-22-04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAIN CORP.

(Name of Corporation)

DOCUMENT NUMBER: P4000063746

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:

BRUCE BARKETT

(Name of Person)

COLLINS, BROWN, CALDWELL, BARKETT, ET AL.

(Name of Firm/Company)

756 BEACHLAND BOULEVARD

(Address)

VERO BEACH, FL 32963

(City/State and Zip Code)

For further information concerning this matter, please call:

BRUCE BARKETT

(Name of Person)

at (772) 231-4343

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2004 APR 15 PM 1:11

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, BRUCE BARKETT

(Name of Registered Agent)

hereby resigns as Registered Agent for CAIN CORP.

(Name of Corporation)

P94000063746

(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:

BRUCE BARKETT

(Typed or Printed Name)

REGISTERED AGENT

(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withdrawn corporation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**