P96000058368

(7)			
(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
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PICK-UP	MAIT	MAIL	
(Bu	isiness Entity Nam	ne)	
(Do	cument Number)		
•			
Certified Copies	Certificates of Status		
Supplied Instructions to	Filing Officers		
Special Instructions to	Filing Officer:		
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Office Use Only



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SEURETARY OF STATE ALLAHASSEE, ET ORIO.

R.A. RESign.

MAR 2 6 2010

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Colhral ad Educational Productions (Name of Corporation)
DOCUMENT NUMBER: <u>P96000058368</u>
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:
(Name of Person)
(Name of Firm/Company)
932 W. Tennessee Trace (Address) St. Do Has, Fla. 32239 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Kah Cul Day at (904) 5252045 (Name of Person) at (904) baytime 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

DIOMAR 25 AM 8: 08



March 19, 2010

KAHLIL DAY 932 W TENN TRACE ST JOHNS, FL 32259

SUBJECT: CULTURAL AND EDUCATIONAL PRODUCTIONS, INC.

Ref. Number: P96000058368

We have received your document for CULTURAL AND EDUCATIONAL PRODUCTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 1999 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application or annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year.

Therefore, the total amount due to reinstate the corporation is \$2400.00. Add an additional \$8.75 for each certificate of status requested.

The changes reflected in your document can be made on the reinstatement application. You can deduct the fee previously submitted from the reinstatement fee due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 110A00006888

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Fursiant to the provisions of sections $607.0392(2)$, $617.0302(2)$, 607.1309 , or 617	.1309,		
Florida Statutes, the undersigned, Rahle Dry			
(Name of Registered Agent)			_
nereby resigns as Registered Agent for Cultural and Education (Name of Corporation)	whe	<u>I</u> ,P.,	ioduchen
•	T_{a}	nc.	
P9600058368	. حر	,0	
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last kno	wn addr	ess.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed. (Signature of Resigning Agent)	on whic	h	
		~>	
If signing on behalf of an entity:		=	•
,		<u> </u>	acidad ,
Kahl: 1 Amyr Day (Typed or Printed Name)	333	2010 HAR 25 P	
Resident agent (Capacity)	F STATE FLORIDA	PH 12: 45	O

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