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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATEME DIVISION OF OCCUPATIONS 02 OCT 28 PH 3: 15

Toldis

GOLD COAST EQUIPMENT, INC.

P.O. Box 48167 Tampa, FL 33647 Phone (813) 254-6420

ATTN: Division of Corporations

September 30, 2002

PO Box 6327

Tallahassee, FL 32314

SUBJECT: (

GOLD COAST EQUIPMENT, INC.

FEIN# 65-0827807

It has been approved by all shareholders, at a meeting on 09/30/02 to dissolve the above stated corporation. Attached find your completed form #607.1403.

Please find enclosed a check for \$43.75, which covers the cost of filling said dissolution and for a return certified certificate of status.

If any questions remain, please call 813 254-6420.

Sincerely

GOLD COAST EQUIPMENT, INC.

ferome E. Surprise

/President/Sec-Treasurer

Enclosures: 2

ARTICLES OF DISSOLUTION

02007 20 PH 3: 15

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: GOLD COAS! Component, In
SECOND:	The date dissolution was authorized: September 30,2002
THIRD:	Adoption of Dissolution (CHECK ONE)
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
Disa	solution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Sig Signature _	the Say of September , 2002
	(By the Chairman or Vide Chairman of the Board, President, or other officer) Jerone E Suppose (Typed or printed name)
	President Sec-Tresum.