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PICK-UP WAIT MAIL		
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(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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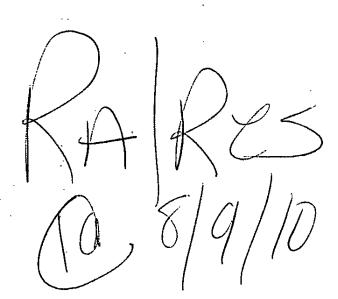
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TALLAHASSEE FLORIDA



COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: GULFCOAST INTERNATIONAL PRODUCTS, INC. (Name of Corporation)
DOCI	JMENT NUMBER: P98000066118
	aclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
	return all correspondence concerning this matter to the following:
	HAEL PHELAN
	(Name of Person)
MICH	HAEL MOECKER & ASSOCIATES
	(Name of Firm/Company)
6861	S.W. 196TH AVENUE SUITE 201
	(Address)
FOR	T LAUDERDALE, FL 33332
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
MICH	AAEL PHELAN (Name of Person) at (954) 252-1560 (Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporatio .00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,CY	/NTHIA GITKIN
, <u> </u>	(Name of Registered Agent)
hereby resigns as Registered Agent for	GULFCOAST INTERNATIONAL PRODUCTS
·	(Name of Corporation)
P98000066118	
(Document Number, if known)	
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
Cychi	Stor
(5)	gnature of Resigning Agent)
If signing on behalf of an entity:	
(Typed or Printed Name)
4. · <u> </u>	(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily disso

\$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