P98000072992

Requester's Name			, "					
Address								
C DAVID L. WILDMAN ATTORNEY AT LAW POST OFFICE BOX 102 MELBOURNE, FLORIDA	600004519596 -08/06/0101108007 *****70.00 *****35.0							
CORPORATION NAME(S) & DOCUME	MENT NUM	BER(S), (if k	mown):				-	
1(Corporation Name) 2(Corporation Name)	•	Oocument #)		SECRETARY TALLAHASSE	01 AUG 6		· —	
3(Corporation Name)		Occument #)		OF STATE E.FLORIDA	AM II: 24			
(Corporation Name)	(I	Oocument #)	<u> </u>					
Walk in Pick up time		- .	Certifie					
☐ Mail out ☐ Will wait	☐ Photoc	ору	Certific	ate of St	atus			
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS	Resig	endment ignation of R.A., Officer/Director nge of Registered Agent solution/Withdrawal						
OTHER FILINGS	REGIST	RATION/QUALIFICATION						
Annual Report Fictitious Name	Reins	ed Partnershij statement emark	p		·.	- -	-2 -24 -	
			Examine	r's Initi:	als			

CR2E031(7/97)

RESIGNATION OF OFFICER AND/OR DIRECTOR

AFFIDAVIT

STATE OF FLORIDA:				
COUNTY OF BREVARD:	- ,			
BEFORE ME, the u	undersigned	authority,	personally	appeared
the best of <u>his</u> knowledge, i	information and		ng first duly sw penalties of per	orn, says to jury:
1. That <u>he</u> has resigned as a .	Dire	ector (Title)		of
T.B.C. ENTERTAINMENT, INC (Name of Corporation)	C.		, a Florida con	poration;
2. That the corporation has been notificated. 3. That corporate minutes relating to the superior of the superi			OI AUG-6 AM II: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Sworn to and subscribed before me this	13th di	ay ofJuly,	2001.	_· .
	Brind	OK BIN NOTARY PUBI	ckhemer	<u>. </u>

My Commission Expires:



FILING FEE IS \$3:00