

P99000045877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

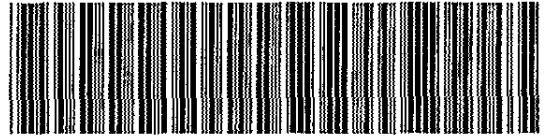
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Rec.  
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FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

July 21, 2003

Gerald G. Smart  
Business & Professional Management  
Post Office Drawer 2736  
Fort Myers, FL 33902-2736

SUBJECT: MASTER LIGHTING & ELECTRIC, INC.  
Ref. Number: P99000045877

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Enclosed is a form to resign as registered agent. The fee to resign as agent of a dissolved corporation is \$35. Make your check payable to the Department of State.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 303A00042403

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DIVISION OF CORPORATIONS

# BUSINESS & PROFESSIONAL MANAGEMENT

POST OFFICE DRAWER 2736, FORT MYERS, FLORIDA 33902-2736

JULY 16 2003

FLORIDA SECRETARY OF STATE  
P.O.BOX 6327  
TALLAHASSEE, FL 32314

RE: MASTER LIGHTING &  
ELECTRIC, INC

DEAR SIRs:

I HAVE BEEN LISTED AS THE REGISTERED AGENT FOR THE ABOVE NAMED. THEY WERE  
INCORPORATED ON MAY 20TH 1999. DOC # P99000045877.

I HAVE NOT SEEN THIS CLIENT SINCE THAT TIME.

I WISH YOU REVOKE MY RESPONSIBILITIES AS THE REGISTERED AGENT.

PLEASE RESPOND.



GERALD G. SMART

RECEIVED

JUL 18 AM 10:49

OF CORPORATE



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT**

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

Florida Statutes, the undersigned, Gerald G. Smar  
(Name of registered agent)

hereby resigns as Registered Agent for Mason Lighting & Electric Inc  
(Name of corporation)

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]  
(Signature of resigning agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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03 SEP 12 AM 10:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314