

P990000074498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

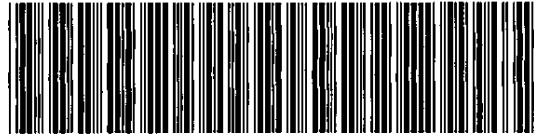
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700131279007

07/17/08--01004--003 \*\*87.50

LA Design

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

08 JUL 16 PM 2:09

FILED

T. Roberts JUL 17 2008



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 30, 2008

JESUS RABEIRO  
1095 WEST 68TH ST #2  
HIALEAH, FL 33014

SUBJECT: ABBY ASSOCIATES REHABILITATION CENTER CORP. .  
Ref. Number: P99000074498

We have received your document for ABBY ASSOCIATES REHABILITATION CENTER CORP.. However, the document has not been filed and is being returned for the following:

The fee to resign as registered agent of an active corporation is \$87.50

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 208A00039006

RECEIVED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

2008 JUL 16 AM 8:00

RECEIVED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Abby Associates Rehabilitation Center Corp.  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000074498

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:

Jesus Babeiro  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

1095 West 68th St. #2  
(Address)

Hialeah, FL 33014  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jesus Babeiro at (986) 873-8152  
(Name of Person) (Area Code & Daytime 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

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

Florida Statutes, the undersigned, \_\_\_\_\_

Jesus Babeiro

(Name of Registered Agent)

hereby resigns as Registered Agent for \_\_\_\_\_

Abby Associates Rehabilitation Center

(Name of Corporation)

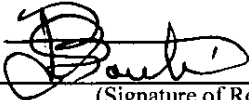
Corp.

P99000074498

(Document Number, if known)

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.

X   
(Signature of Resigning Agent)

If signing on behalf of an entity:

Jesus Babeiro  
(Typed or Printed Name)

Vice-President  
(Capacity)

**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**

FILED  
08 JUL 16 PM 2:10  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE