

501868

Requestor's Name
 Larry V. Bishins, Esq.
 4548 North Federal Highway
 Fort Lauderdale, FL 33308-5271

City/State/Zip Phone #

900002109239--1
 -03/11/97--01016--007
 *****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

FILED
 97 MAR 10 PM 2:55
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

VS MAR 13 1997

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Examiner's Initials	
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ARTICLES OF DISSOLUTION

OF

MONTOR, INC.

ARTICLE I

The name of the corporation is MONTOR, INC.

ARTICLE II

The dissolution was authorized on December 30th, 1996, which is the effective date of these Articles of Dissolution.

ARTICLE III

The corporation elected to dissolve by act of the corporation on the 30th day of December, 1996, by a unanimous vote of the Shareholders and Directors at a Joint Special Meeting of the Directors and Shareholders held on the 30th day of December 1996. Such unanimous vote of the Shareholders was sufficient for approval.

IN WITNESS WHEREOF, MONTOR, INC. has executed this Agreement by its authorized officer on the 30th day of December 1996.

MONTOR, INC.

By: 

William Howard Rees, President

ATTEST:

By: 

Beverly Sutton-Brown, Secretary

Prepared By:
Larry V. Bishins, Esq.
4548 North Federal Highway
Fort Lauderdale, FL 33308
(954) 772-7900
Fla Bar No. 178986

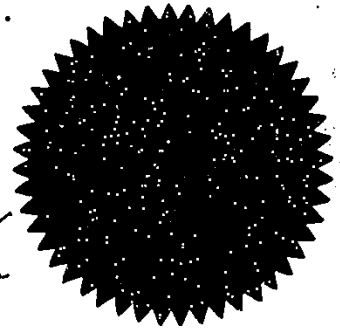
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TALLAHASSEE FLORIDA

Country of Canada)
Province of Ontario)SS.

13 The foregoing instrument was acknowledged before me this
day of February 1997 by William Howard Rees.

Loranger
Notary Public
Vicky Loranger

Personally known OR Produced Identification
Type of Identification Produced Driver's License



Country of Canada)
Province of Ontario)SS.

13 The foregoing instrument was acknowledged before me this
day of February 1997 by Beverly Sutton-Brown.

Loranger
Notary Public
Vicky Loranger

Personally known OR Produced Identification
Type of Identification Produced Driver's License

502044

STATE OF FLORIDA
OFFICE OF THE COMPTROLLER
APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: Shoney's of Vero Beach, Inc. EIN or SS#: 52-1710789

Address: 2323 Riverside Dr
Danville VA 24540

Amount: \$165.00 Date Paid _____

Reason for claim: Corp merged, no AIR required - 502044
897 2/21/97

Certified true and correct this 3rd day of March, 19 97.

Signature [Signature] PRESIDENT

* Must be completed if authority is other than Section 215.26, Florida Statutes.

SURB

For Agency Use Only

Agency recommends approval of above claim and submits the following information to substantiate the claim: Amount of recommended refund \$ 165.00

The amount requested above was originally deposited into the State Treasury, as a part of the funds deposited on State Treasurer's Receipt No. 920061008 dated 02-16-97

Name of Account _____

4520213000145300000000010000

Statutory Authority for Collection 607

It is requested that payment be made from the following account:

NAME OF ACCOUNT _____

4520213000145300000022002000

Certified true and correct this _____ day of _____, 19 _____

Department of State, Division of Corporations _____

(Agency) (Authorized Signature and Title)