5343//

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
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	(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION OF CO	KPORATION
DOCUMENT NUMBER: 534311	
The enclosed Articles of Dissolution and fee are submi	itted for filing.
Please return all correspondence concerning this matter	to the following:
GENE APELA do (Name of Contact Pers	
GASCAR ENTERPRISE (Firm/Company)	5 INC
1950 TALLRIDGE RO	<i>a</i>
, ,	
MELBOYRNE FL (City/State and Zip C	32935
(City/State and Zip C	ode)
For further information concerning this matter, please c	all:
GENE APECAdo at (3) (Name of Contact Person)	21) 298 - 2619 Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
. /	al copy is Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: GASCAR ENTERPRISES INC. The document number of the corporation (if known): 5343// SECOND: The file date of the articles of incorporation: $\frac{2/27//1991}{}$ THIRD: (CHECK AT LEAST ONE BOX) FOURTH: None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTII: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hards of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) GENE APECAdo

(Typed or printed name of person signing)

Filing Fee: \$35

PRESIDENT
(Title of Person Signing)

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: GASCAR ENTERPRISES INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

NAME O	F CLAIM	ANT	
WHAT T	HE CLAIM	15 ALL	A BOUT
NHEN	WAS TH	E REAS	ON OF THE
CLA	IN ESTAB	BLISHED	
DE TAILED	ACCOUNT	OT THE	CLAIN

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1950 TALLAIDGE RD MELBOURNE FL 32935

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

GENE APELACIO

Printed Name of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00