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COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CT: MIAMI INVESTORS, CORP (Name of Corporation)
	(Name of Corporation)
DOCU	MENT NUMBER: P0000018840
The enc	losed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please r	eturn all correspondence concerning this matter to the following:
	DALIA SALAZAR (Name of Person)
	(Name of Person)
P	ARATORE ENTERPRISES (Name of Firm/Company)
	(Name of Firm/Company)
<u>/a</u>	08 NW 125 Temace. (Address)
	(Address)
<u></u> 50	INRISE FL 333Q3 (City/State and Zip Code)
	(City/State and Zip Code)
For furt	her information concerning this matter, please call:
DA	(Name of Person) at (954) 838 7406 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	d is a check for \$35.00 made payable to the Florida Department of State.
Division Clifton I 2661 Ex	Mailing Address: nent Section of Corporations Building Post Office Box 6327 recutive Center Circle see, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. DALIA SALAZAR	, hereby resign as	γP		
			(Title)	
of MIAMI INVESTO	RS, CORP			
, (Name	of Corporation)	•		
(Document Number, if known)	_, a corporation organized und	er the laws of	f the State of	
(Document Number, it known)				
-FLORI DA	_			
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	ignature of resigning officer/director	<u>.</u>	_ 22	
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FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314