

P02000117078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

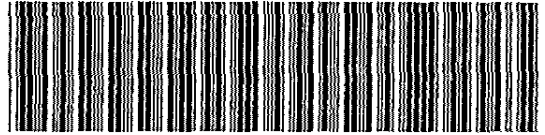
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Amerimed Diagnostic Services, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P02000117078

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Guidover Manso

(Name of Person)

Amerimed Diagnostic Services, Inc.

(Name of Firm/Company)

1950 West Martin Luther King, Blvd

(Address)

Tampa, FL 33607

(City/State and Zip Code)

For further information concerning this matter, please call:

Guidover Manso at (813) 877-9700

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

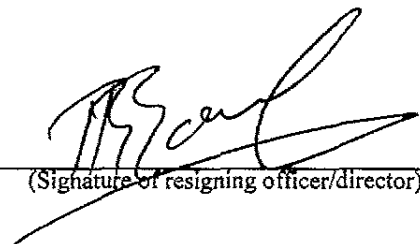
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05 APR -4 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


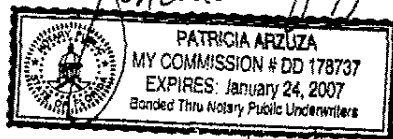
I, Robert Luis Rosabal, hereby resign as President / Director
(Title)

of Amerimed Diagnostic Services, Inc.
(Name of Corporation)

P02000117078, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

3/29/05

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

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