

PO4000022024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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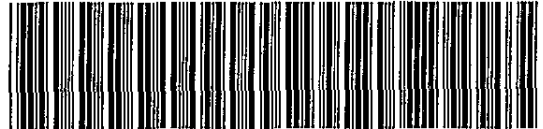
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

APR 16 2006

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** D & H Institute, P.A.  
(Name of Corporation)

**DOCUMENT NUMBER:** 904000022024

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

Please return all correspondence concerning this matter to the following:

Desi Kellermann, Esq.  
(Name of Person)

Rosenthal Rosenthal Raske  
(Name of Firm/Company)

2875 NE 191st Street Suite 500  
(Address)

Aventura FL 33186  
(City/State and Zip Code)

For further information concerning this matter, please call:

Desi Kellermann at ( 305 ) 937 0360  
(Name of Person) (Area Code & Daytime Telephone Number)

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

**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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Donna Bravender, hereby resign as Pres + treasurer  
(Title)

of D & H Institute P.A.  
(Name of Corporation)

04000022024, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida.

Donna Bravender  
(Signature of resigning officer/director)

**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

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