P07000049983

• .	(\mathcal{G})	
•	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT MAIL	
	(Business Entity Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ABREU & VOZZI IN	AMIGRATION CONSULT, INC.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: P07	000049983
The enclosed Officer/Director Resignation	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
MANUEL VOZZY	
(Name of Pers	son)
(Name of Firm/Co	ompany)
625 SW 1 STREET	
(Address)	
HALLANDALE, FL 33009	·
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
MANUEL VOZZI	at (786) 291-7976 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mad	le 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

, MANUEL VOZZY	, hereby resign as VICE PRESIDENT (VP)
	(Title)
of_ABREU & VOZZI IMMIGRAT	ION CONSULT, INC.
(Name	e of Corporation)
P07000049983	, a corporation organized under the laws of the State of
(Document Number, if known)	•
FLORIDA	
	Signature of resigning officer director FILED FILING FEE IS \$35.00 to Florida Department of State and mail to:

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