

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EAGLE TAX REPRESENTATION, CORP.

Account Number: 120070000037

Phone

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Fax Number

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

VICTOR AND CARLOS SERVICES, INC

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COVER LETTER

VICTOR AND CARLOS SERVICES, INC (Name of Corporation) P07000110069 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PAULO OLIVEIRA (Name of Person) EAGLE TAX REPRESENTATION, CORP. (Name of Firm/Company) **4641 N STATE ROAD 7 STE 18** (Address) **COCONUT CREEK, FL - 33073** (City/State and Zip Code) For further information concerning this matter, please call: Paulo Oliveira, E.A. (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

CR2F044(08/05)

TO:

Amendment Section Division of Corporations

FILED

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE TALLAHASSEE. FLORIDA

CARLOS LOGGIA

, hereby resign as

VICE PRESIDENT

(Title)

Of VICTOR AND CARLOS SERVICES, INC

(Name of Corporation)

P07000110069

, a corporation organized under the laws of the State of

(Document Number, if known)

FLORIDA

(Segnature 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
Tullahassee, Florida 32314

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