

P97000016394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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*off. Resign*  
C.COULLIETTE

DEC 22 2010

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Action Insurance Agency, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P97000016394

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

Please return all correspondence concerning this matter to the following:

Georgina Blanco-Elias, Esq.

(Name of Person)

BLANCO LAW, P.A.

(Name of Firm/Company)

6307 SW 40 STREET

(Address)

MIAMI, FL 33155

(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN D. CABRERA

(Name of Person)

at ( 786 ) 303-5789

(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

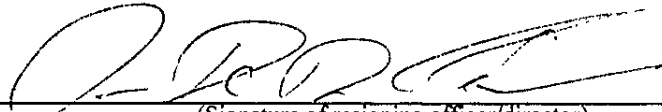
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JUAN D. CABRERA, hereby resign as DIRECTOR  
(Title)

of ACTION INSURANCE AGENCY, INC.  
(Name of Corporation)

P97000016394, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

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DIVISION OF CORPORATIONS  
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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