

433213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

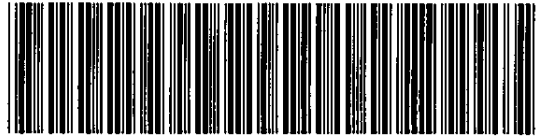
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation

TB

10-24-07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABBA EQUIPMENT, INC.
(Name of Corporation)

DOCUMENT NUMBER: 433213

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

Please return all correspondence concerning this matter to the following:

JOHN R. McELWEE
(Name of Person)

ABBA EQUIPMENT, INC.
(Name of Firm/Company)

5553 ANGLERS AVE, #113
(Address)

FT. LAUDERDALE, FL 33312
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN McELWEE at (954) 989-1704
(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**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, NINA McELWEE, hereby resign as VP
(Title)

of ABBA EQUIPMENT, INC.
(Name of Corporation)

433213, 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

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

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