

527 332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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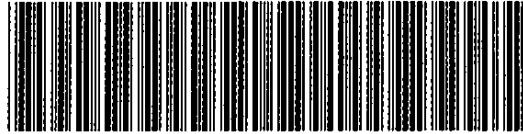
(Business Entity Name)

(Document Number)

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Officer Resign
C. M. Murphy
1/23/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pugliese, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 527332

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

Please return all correspondence concerning this matter to the following:

Vera Pugliese
(Name of Person)

Pugliese, Inc.
(Name of Firm/Company)

902 Lee Blvd. #2
(Address)

Lehigh Acres, FL 33936
(City/State and Zip Code)

For further information concerning this matter, please call:

Vera Pugliese at (239) 368-5563
(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

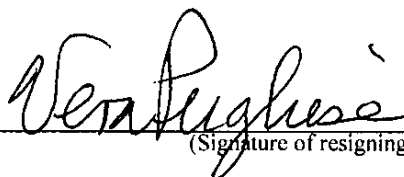
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Vera Pugliese, hereby resign as President
(Title)

of Pugliese, Inc.,
(Name of Corporation)

527332, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(Signature of resigning officer/director)

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08 JAN 15 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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