City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S)	&	DOCUMENT NUMBER(S),	(if known):
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1				
	(Corporation Name)	(Doct	ument #)	
2			. 11	
	(Corporation Name)	(Doct	iment #)	
3	(Corporation Name)	(Dogs	ment #)	
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4	(Corporation Name)	(Docu	iment #)	<del></del>
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Mail out	Will wait	Photocopy	Certificate	
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NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/I
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger

	OTHER FILINGS		REGISTRATION
	Annual Report	1.15	QUALIFICATION
	Fictitious Name		Foreign
	Name Reservation	ļ	Limited Partnership
			Reinstatement

14.7 <b>1</b> )	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

800002324388---6; -10/20/97--01109--002 \*\*\*\*\*\*20.00 \*\*\*\*\*\*20.00

Examiner's Initials	

8000023243818--6 -10/20/97--01183--001 \*\*\*\*\*\*50.00 \*\*\*\*\*\*15.00

Other



## Florida Department of State, Jim Smith, Secretary of State

## AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

STATE OF FLORIDA  COUNTY OF DADE		
I. BLANCA II. DUQUE after knowledge, information and belief, and ur correct:	being duly sworn, s nder the penalties of	tate that to the best of my perjury, the following is true and
1. I. BLANCA M. DUQUE	, hereby resign as _	SECRETARY O
ROGCAB WAREHOUSE CONDOM. (Name of Corporation)		. a Florida corporation
<ul><li>That the corporation has been notified</li><li>That corporate minutes relating to the</li></ul>	resignation are unav	vallable.
	Signature of resign	Ing officer/director-
Sworn to and subscribed before me this _	8day of _	OCTOBER, 1997
	michael Garguit	TARY PUBLIC
My Commission Expires: <u>Dec 10, 2000</u>		OFFICIAL SOCIAL

FILING FEE IS \$20.00