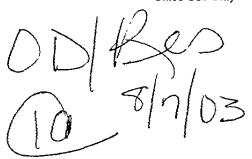
K31755

•		
(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
*	siness Entity Nar	
Certified Copies		
Special Instructions to F	Filing Officer:	







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08/04/03--01018--004 **35.00

03 AUG-4 PM 2: 55 NIVELLARY OF STATE

TRANSMITTAL LETTER

DOCUMENT NUMBER: K31755 The enclosed Officer/Director Resignation for a Corporatio	n and fee are submitted	for filing
		or ming
Please return all correspondence concerning this matter to t	ne ronowing:	
Diana C. Ross-Shaw, Paralegal		
(Name of Person)	- · · ·	
Michael G.Salazar, P.A.		
(Name of Firm/Company)	 ·	
1001 S Andrews Avenue #100		
(Address)	<u></u> • • • • • • • • • • • • • • • • • •	* 5 %
Ft Lauderdale, FL 33316		
(City/State and Zip Code)	-	_ ****
For further information concerning this matter, please call:		
•		
Diana C Ross-Shaw 954	467-7737 de & Daytime Telephone I	

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

FILED

03 AUG -4 PM 2: 55

SEGNEJARY OF STATE
TALLAHASSEE, FLORIDA

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, hereby resign as President and Director
(Title)
me of Corporation)
, a corporation organized under the laws of the State of
(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

