

677801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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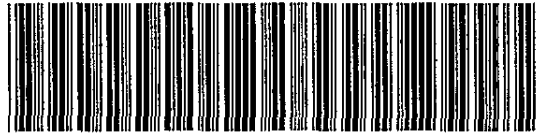
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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98



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 20, 2004

Reginald Wellman  
Harold Sports, Inc.  
11401 NW 12 Street, #338  
Miami, FL 33172

SUBJECT: HAROLD SPORTS, INC.  
Ref. Number: L77801

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The fee to file an officer/director resignation is \$35.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 704A00060308

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Harold Sports, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** L 778 01

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

Please return all correspondence concerning this matter to the following:

Reginald Wellman  
(Name of Person)

Harold Sports, Inc.  
(Name of Firm/Company)

11401 NW 12 Street #338  
(Address)

Miami, FL 33172  
(City/State and Zip Code)

For further information concerning this matter, please call:

Reginald Wellman at ( 305 ) 639-2826  
(Name of Person) (Area Code & Daytime Telephone Number)

~~Enclosed is a check for \$35.00 made payable to the Florida Department of State.~~

**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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Alma Wellman, hereby resign as Secretary / Treasurer  
(Title)  
of Harold Sports, Inc.  
(Name of Corporation)  
L77801, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Alma Wellman  
(Signature of resigning officer/director)

**FILED**  
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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