

MOO 143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800101174578

05/04/07--01013--032 **35.00

Off/Dir Recd

FILED

07 MAY - 4 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. R. 1111 10 0000

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EL CENTRO RESTAURANT, INC
(Name of Corporation)

DOCUMENT NUMBER: M00143

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

Please return all correspondence concerning this matter to the following:

ROSA M. PEREZ

(Name of Person)

EL CENTRO RESTAURANT, INC

(Name of Firm/Company)

862 EAST 41ST STREET

(Address)

HIALEAH FL 33013

(City/State and Zip Code)

For further information concerning this matter, please call:

ROSA M. PEREZ

(Name of Person)

at (836) 696-3620

(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**

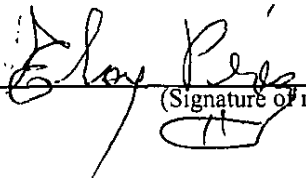
FILED
07 MAY -4 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ELOY PERZ, hereby resign as PRESIDENT
(Title)

of EL CENTRO RESTAURANT INC,
(Name of Corporation)

MOO143, 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