

NO2000004638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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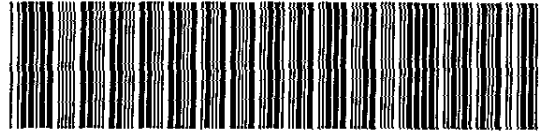
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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TALLAHASSEE, FLORIDA

TO: Amendment Section
Division of Corporations

SUBJECT: EDUcomm CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: NO2000004638

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

Please return all correspondence concerning this matter to the following:

RODOLFO TANCREDI
(Name of Person)

EDUcomm CORPORATION
(Name of Firm/Company)

2121 PONCE DE LEON BLVD, STE 850
(Address)

CORAL GABLES, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

RODOLFO TANCREDI at (305) 476-2974
(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

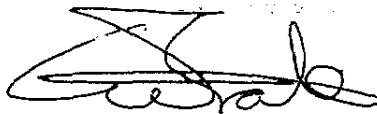
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALEJO PERALTA, hereby resign as PRESIDENT
(Title)

of EDUCOMM CORPORATION
(Name of Corporation)

NO20000004638, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

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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