

N 03 000000 7591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

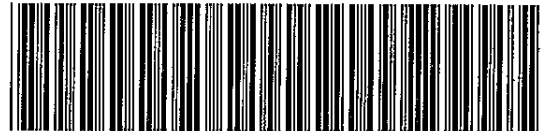
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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9/29/03

MARK LUGO
9868 Sandalfoot Blvd. #205
Boca Raton, FL 33428
TEL: 561-558-1302 Alt.#: 310-739-3193

September 22, 2003

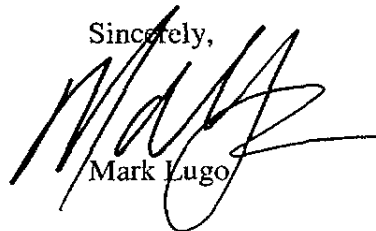
Mr. George Riverton
5701 San Houston Parkway
Houston TX 77016-1227

Re: Resignation as Registered Agent for the Corporation known as "Events of Ethnic Diversity of the Palm Beaches, Inc.

Dear Mr. Riverton:

Please find enclosed my resignation as Director and Registered Agent for the above referenced corporation. I have forwarded a copy to the State of Florida, Division of Corporations.

Sincerely,



Mark Lugo

Enclosures (3)

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EVENTS OF ETHNIC DIVERSITY OF THE PALM BEACHES, INC
(Name of Corporation)

DOCUMENT NUMBER: NO30000007591

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK LUGO

(Name of Person)

(Name of Firm/Company)

9868 Sandalfoot Blvd #205

(Address)

BOCA RATON FL 33428

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK LUGO

(Name of Person)

at (310) 739-3193

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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, Mark Lugo, hereby resign as DIRECTOR
(Title)
of EVENTS OF ETHNIC DIVERSITY OF THE PALM BEACHES
(Name of Corporation) INC
NO30000007591, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of resigning officer/director)

FILED
03 SEP 25 PM 3:07
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