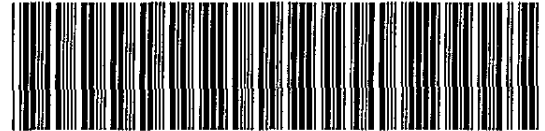


NO40000004355

(Requestor's Name)

(Address)

(Address)



600047547886

Horrero Cruz
6187 NW 167 St. # H-24
Miami Lakes, Fl. 33015

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

03/07/05--01033--010 **35.00

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**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, HOMERO CRUZ, hereby resign as PRESIDENT
(Title)

of PERIL HILLS AT MIAMI DADE TWO CONDOMINIUM ASSOCIATION, INC.
(Name of Corporation)

NO400000 4355 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