N04000011510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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OFF. Resign

G. Castillo JAN 27 2005

FROM :LINDA BERNARD STUDIO FAX NO. :561 478 2631 Jan. 20 2005 02:00PM P1

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Resignation : Cures For Florida
(Name of Corporation)

DOCUMENT NUMBER: N04000011510

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

Please return all correspondence concerning this matter to the following:

Sabrina Cohen
(Name of Person)

Cures For Florida
(Name of Firm/Company)

2068 Cezanne Road
(Address)

West Palm Beach, FL 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

Art Brownstein at (561) 351-8570
(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, Sabrina Cohen, hereby resign as Vice President
(Title)

of Cures For Florida
(Name of Corporation)

N04000011510, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.

x Sabrina Cohen
(Signature of resigning officer/director)

FILED
05 JAN 24 PM 1:20
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