N1000006612

(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:	

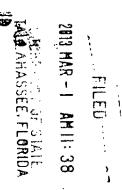
Office Use Only



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resignation Ob Typier

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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: PARADISE EDUCATION FOUNDATION INC	
(Name of Corporation) DOCUMENT NUMBER: N11000006612	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fil	ing
Please return all correspondence concerning this matter to the following:	
PHILIP MCNALLY	
(Name of Person)	
PARADISE EDUCATION FOUNDATION INC	
(Name of Firm/Company)	
540 N FEDERAL HWY	
(Address)	
FT LAUDERDALE FL 33301	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
PHILIP MCNALLY at (954) 764-8778 (Name of Person) (Area Code & Daytime Telephone Number	
(Name of Person) (Area Code & Daytime Telephone Numbe	<u>r</u>)
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 2813 MAR -1 AM II: 38 FOR A CORPORATION

FILED

FALLAHASSEE, FLORIDA

L WAYNE BERGER	, hereby resign as CHAIRMAN	
	(Title)	
of PARADISE EDUCATION FO		
(Nar	ne of Corporation)	
N11000006612 'Common (Document Number, if known)	, a corporation organized under the laws of the State of	
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