N1800000 7429

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

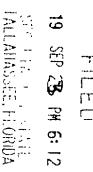
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Blue Fire Theatre Inc (Name of Corporation) DOCUMENT NUMBER: N/8 DODDO 7429
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gill Johnston (Name of Person)
Name of Firm/Company)
96571 Blackrock Rd. (Address)
Vulee F1 32097 (City/State and Zip Code)
For further information concerning this matter, please call:
Gill Johnston at 904 583-5282 (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 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Peter Gill Johnston, hereby resign as President (Title)	
of Blue Fire Theatre Inc. (Name of Corporation)	·
N 180000 7429, a corporation organized under the laws of the Sta (Document Number, if known)	te of
<u>Florida</u>	
(Signature of realigning officer/director) FILING FEE IS \$35.00	19 SEP 23 PH
FILING FEE IS \$35.00	PH 6:12

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314