N97000001330

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone) #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nan	ne)
•	·	•
(Docu	ıment Number)	
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Special Instructions to Fi	ling Officer:	
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Office Use Only



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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	EL SANTU	ARIO INC				
~ ·, · - · <u> </u>	<u> </u>		(Name	of Corpora	ation)	
DOCUMENT	NUMBER:	N970000	01330			
The enclosed (Officer/Director	Resignation 1	for a C	orporation	and fee are sub	omitted for filing
Please return a	ll correspondenc	e concerning	this n	natter to th	e following:	
	ANN M	GIL				
 	(Name of	Person)				
	Name of Fire	m/Company)				* .
	(Name of Pil)	in Company)				
	221 NW 132	COURT				
	(Addi	ress)			· · · · · · · · · · · · · · · · · · ·	•
	MIAMI, FL 3	3182				
	(City/State ar	nd Zip Code)				
For further info	ormation concern	ning this mat	ter, ple	ase call:		
	ANN M GIL		at (786	525-5377	ephone Number)
·	(Name of Person	1) -		Area Code	& Daytime Tele	ephone Number)
Enclosed is a c	check for \$35.00	made payabl	e to th	e Florida I	Department of S	State.
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	Amen Divisi 409 E.	on of C Gaine	ess: Section Corporation s Street FL 32399		_

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

		A / DIRECTOR RESIGNA' OR A CORPORATION	FION RESERVED	
I,	ANN M GIL	, hereby resign as	SC - SECRETARY (Title)	S. C.
of	EL SANTUARIO	INC me of Corporation)		·
	N97000001330 (Document Number, if known) FLORIDA	, a corporation organized unde	er the laws of the State of	
	FLORIDA			
	<u> </u>	(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