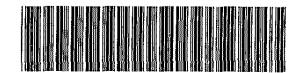
P000000050815

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
, DICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



100025887611

01/13/04--01014--012 **75.00



Old Resign

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Aviation Masters Inc (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P 00000 50815
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
EINO KYMALAINEN (Name of Person)
AVIATION MASTERS INC. (Name of Firm/Company)
6500 NW 12th AVE., SULTE 118 (Address)
FORT LAUDERDALE, FL 333U9 (City/State and Zip Code)
For further information concerning this matter, please call:
EINO KYMALAINEN at (954) 771-0112 (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 EDGAR CONZALEZ		ZALEZ,	_, hereby resign as	TEESURER	
				(Title)	
of	HOITAINA	MASTERS	luc.		
		(Name of Corporation	1)		
	0000050815 Occument Number, if known		tion organized unde	er the laws of the State of	
Ŧ	LORIDA	·			

Elecuture of resigning officer/director) 03/03/2003

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

04 JAN 12 AM 11: 34 SECRETARY OF STATE