

P00000079220

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T. Smith JUL 27 2005

JP

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Coral Way Injury Center, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO00000079220

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

Please return all correspondence concerning this matter to the following:

Deborah Pinerio
(Name of Person)

Coral Way Injury Center INC
(Name of Firm/Company)

7050 NW 4th #202
(Address)

Plantation, FL 33317
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Pinerio at (305) 828-1070
(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, Deborah Pinero, hereby resign as President
(Title)

of Coral Way Injury Center, Inc.
(Name of Corporation)

PU0000079220, a corporation organized under the laws of the State of
(Document Number, if known)

Florida



(Signature of resigning officer/director)

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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