0000085958

(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:





500070428365

04/17/06--01016--014 **35.00

0/D resign

COVER LETTER

SUBJECT: BROKE N POOR TING. (Name of Corporation)
DOCUMENT NUMBER: PDDDDDD085958
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Name of Person)
10 John 7 Sutton + Associates (Name of Firm/Company)
7721 SW UZnd Ave., First Floor
South Miami, FL 33143 (City/State and Zip Code)
For further information concerning this matter, please call:
Ohn R. Sutton at (305) (Month of Person) at (448) (Area Code & Daytime Telephone Number)

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

TO: Amendment Section

Division of Corporations

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION OFFICER / DIRECTOR RESIGNATION OFFICER / D

I, Thomas Borelc, hereby resign as STD (Title)	***
of Proke N TOOR TINC. (Name of Corporation)	
T0000085958, a corporation organized under the laws of the State of (Document Number, if known)	
Florida	4. %
V	

(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