

PO1000040930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 25 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BETTER MEDICAL CARE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000040930

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

Please return all correspondence concerning this matter to the following:

Guillermo D Jalil

(Name of Person)

(Name of Firm/Company)

915 Doyle Road #303-195

(Address)

Deltona FL 32725

(City/State and Zip Code)

For further information concerning this matter, please call:

Guillermo D Jalil

(Name of Person)

at (484) 256-4563

(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

Mailing Address:

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Guillermo D Jalil, hereby resign as Director & Officer Positions
(Title)

of BETTER MEDICAL CARE, INC.
(Name of Corporation)

P01000040930, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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