

PO1000054390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

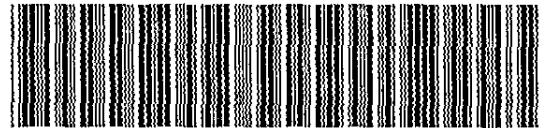
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN JUL 23 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHROME AEROSPACE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000054390

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

JOHN HATZHOUSEPIAN

(Name of Person)

CHROME AEROSPACE, INC.

(Name of Firm/Company)

345-85 ST STE 8

(Address)

MIAMI BEACH, FL. 33141

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN HATZHOUSEPIAN

(Name of Person)

at (416) 938-4270

(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**

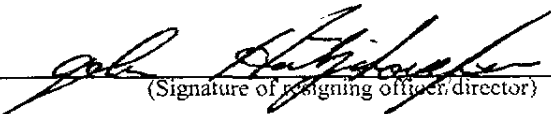
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JOHN HATZHOUSEPIAN, hereby resign as PRESIDENT
(Title)

of CHROME AEROSPACE, INC.
(Name of Corporation)

P01000054390, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X 
(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