

PO1000058596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

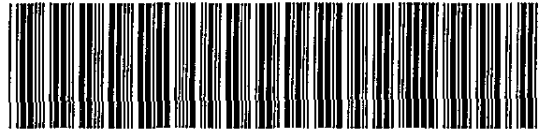
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700032074727

04/09/04--01054--007 **35.00

FILED

04 APR -9 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN APR 15 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Osmar Properties, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P01000058596

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

Please return all correspondence concerning this matter to the following:

Oscar Montalvo

(Name of Person)

Osmar Properties, Inc.

(Name of Firm/Company)

1032 Washington St.

(Address)

Hollywood, Fl. 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

Oscar Montalvo

(Name of Person)

at (

954

) 605-2779

(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**

FILED
04 APR -9 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Oscar Montalvo, hereby resign as Vice President
(Title)

of Osmar Properties, Inc.
(Name of Corporation)

P01000058596, 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