P01000080857

(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:	
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J.C. MOLINA & CO.

ACCOUNTING, TAX & FINANCIAL SERVICES BUSINESS MANAGEMENT EVALUATION

MIAMI,FLORIDA

July 21, 2003

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

DEAR SIR:

ATTACHED ARE: 1- THE OFFICER/DIRECTOR RESIGNATION OF ADELUZ PARTY & DECORATIONS, INC. 2- A CHECK IN THE NAME OF FLORIDA DEPARTMENT OF STATE BY THE AMOUNT OF \$ 43.75 THAT INCLUDE A CERTICATE FEES, 3- COPY OF THE UBR WITH THE NEW BUSINESS AND MALLING ADDRESS.

PLEASE SEND YOUR CERTICATE COPY TO US.

AHLIOC. MOLINA

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ADELUZ PARTY & DECORATIONS, INC
(Name of Corporation)
DOCUMENT NUMBER: PO1000080857
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JULIO MOLINA
(Name of Person)
J. C. MOLINA & CO
(Name of Firm/Company)
8260 W. FLAGLER STREET # 2-C
(Address)
MIAMI, FLORIDA. 33144
(City/State and Zip Code)
For further information concerning this matter, please call:
JULIO MOLINA 31, 305 559-9070
JULIO MOLINA at (305) 559-9070 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, LUCINAVELVA ALMANZAR	, hereby resign as DIRECTOR/TREASURY	
	(Title)	" d t-
of_ADELUZ PARTY & DECORAT		
(Name	of Corporation)	
P01000080857 (Document Number, if known)	a corporation organized under the laws of the State of	
FLORIDA	en de la companio de	

(Signature of regigning officer/director)

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