

PD1000081338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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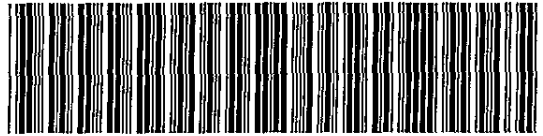
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Resign
T. Lewis 2/25/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARE OF ORLANDO, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 1000081338

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

Please return all correspondence concerning this matter to the following:

IGOR GESSEN
(Name of Person)

(Name of Firm/Company)

14500 SW 160 TERRACE
(Address)

MIAMI - FL 33177
(City/State and Zip Code)

For further information concerning this matter, please call:

SAME at (305) 2543973
(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:
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

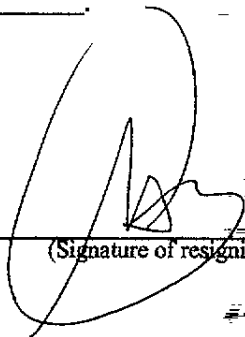
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, IGOR GESSEN, hereby resign as DIRECTOR
(Title)

of ARE OF ORLANDO, INC.
(Name of Corporation)

P01000081338, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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03 FEB 21 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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