

P01000087353



LUIGI DENTAL INC.
LABORATORY

1430 W. BUSCH Blvd. Suite F
TAMPA, FL 33612

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

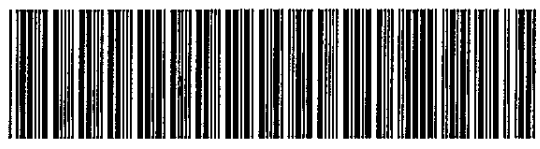
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TALLAHASSEE, FLORIDA

04/11/05--01070--008 **35.00

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

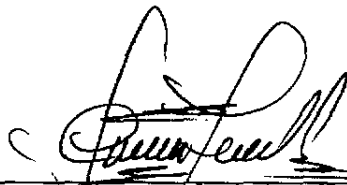
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, GINA BARROS, hereby resign as SECRETARY - T.
(Title)

of LUIGI DENTAL INC.
(Name of Corporation)

PO10.00087353, 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