

PO1000095665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

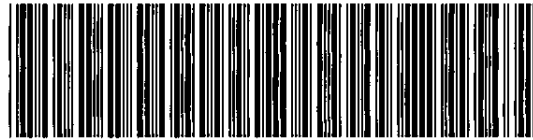
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900095143589

04/03/07--01013--019 *\$35.00

FILED
07 APR -2 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D. Resign
4/3/07
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: B. I. M. A. ENTERPRISES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000095665

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

SADY HERNANDEZ
(Name of Person)

B. I. M. A. ENTERPRISES, INC.
(Name of Firm/Company)

7065 W 4 AVE.
(Address)

HIALEAH, FL 33014
(City/State and Zip Code)

For further information concerning this matter, please call:

SADY HERNANDEZ at (305) 364-4865
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2007

SADY HERNANDEZ
B.I.M.A. ENTERPRISES, INC.
7065 WEST 4TH AVE.
HIALEAH, FL 33014

SUBJECT: B.I.M.A ENTERPRISES, INC.
Ref. Number: P01000095665

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to resign as officer/director for a corporation is \$35 per person resigning.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Document Specialist

Letter Number: 007A00019238

RECEIVED
07 APR -2 AM 8:00
DIVISION OF CORPORATIONS

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MARIO E. MEDINA, hereby resign as DIRECTOR / PRESIDENT
(Title)

of B.I.M.A ENTERPRISES, INC.
(Name of Corporation)

P01000095665, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Mario E. Medina
(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

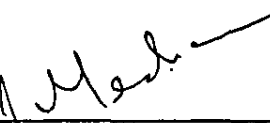
FILED
07 APR - 2 PM 4:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Hialeah, February 28/2007

AFFIDAVIT OF RESIGNATION OF OFFICER AND/OR DIRECTOR

I, MARIO E. MEDINA after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct.

I, MARIO E. MEDINA hereby resign as DIRECTOR/PRESIDENT of B.I.M.A ENTERPRISES, INC., a Florida Corporation.

X 

Signature of Resigning
Officer/Director

STATE OF FLORIDA
COUNTY OF DADE

Sworn and subscribed before me this 28 day of: February
year 2007 by: MARIO E. MEDINA Personally known or Produced -
Identification: Driver Lic # M350-540-59-222-0


Jose Ulloa
Notary PUBLIC

NOTARY PUBLIC - STATE OF FLORIDA
Jose Ulloa
Commission #DD629649
Expires: JAN. 22, 2011
BONDED THRU ATLANTIC BONDING CO., INC.