P02000000769

(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:
V. r. v.

Office Use Only



100115486081

01/25/08--01012--015 **35.00

DE JAN 25 PH 3: 34
SLICKETARY OF STATE
ALLAHASSEE, FLORID

officer Resign cuimmenpuy 2/1/08

COVER LETTER

SUBJECT: Hospitality Safeguards, Inc.
(Name of Corporation)
DOCUMENT NUMBER: POZOGOU OD TVA
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Earl Bleser
(Name of Person)
Hospitality Safeguards, Inc.
(Name of Firm/Company)
4010 Hammersmith Drive
(Address)
Clermont, Florida 34711
(City/State and Zip Code)
For further information concerning this matter, please call:
David Bleser at (407) 590-4532 (Area Code & Daytime Telephone Number)
(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

ŤO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

David M. Bleser	, hereby resign as Vice President	
•,	(Title)	
of_ Hospitality Safeguard , Inc.		
POZ 000007169 (Document Number, if known)	e of Corporation), a corporation organized under the laws of the	: State of
Florida		
	Signature of resigning officer/director)	OB JAN 25 PH 3: 34 SEUNETARY OF STATE TALLAHASSEE, FLORIDA
	FILING FEE IS \$35.00	PH 3: 34 OF STATE E. FLORIDA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314