

P020000003008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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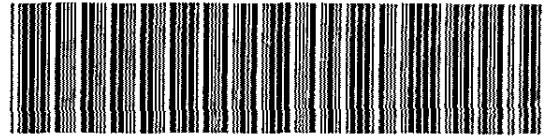
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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(10) 2/7/05

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALVAND AUTO SALES, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO2000003008

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

Please return all correspondence concerning this matter to the following:

KHOSROW OWSIARI
(Name of Person)

ALVAND AUTO SALES, INC.
(Name of Firm/Company)

4885 W Colonial DR
(Address)

Orlando, FL 32808
(City/State and Zip Code)

For further information concerning this matter, please call:

Khosrow OWSIARI at (407) 617-4566
(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

FILED
05 FEB -2 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
05 FEB -2 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Khosrow OWSIARE, hereby resign as T (Title)

of ALVAND AUTO Sales, Inc.
(Name of Corporation)

P02000003008, 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