

PD2000009976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

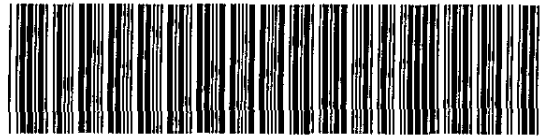
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

MEGA SYSTEMS INC

SUBJECT: _____
(Name of Corporation)

DOCUMENT NUMBER: P02000009976

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

Please return all correspondence concerning this matter to the following:

Luis C. Gutierrez
(Name of Person)

MEGA SYSTEMS INC
(Name of Firm/Company)

6799 SW 15 St
(Address)

Miami, FL 33144
(City/State and Zip Code)

For further information concerning this matter, please call:

Luis C. Gutierrez at (_____) _____
(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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 13, 2004

Luis C. Gutierrez
Mega System, Inc.
6799 SW 15 St.
Miami, FL 33144

SUBJECT: MEGA SYSTEM, INC.
Ref. Number: P02000009976

We have received your document for MEGA SYSTEM, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 604A00059069

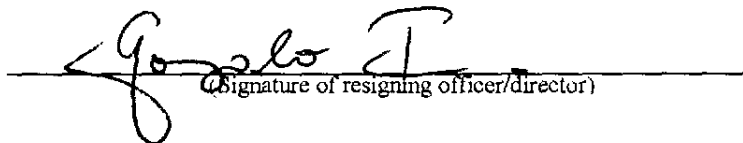
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DEPT OF STATE

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Gonzalo Rincon, hereby resign as President & Director
(Title)

of MEGA SYSTEMS INC
(Name of Corporation)

P02000009976, 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

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

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