P02000014825

(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	idress)	
(Ci	ty/State/Zip/Phone	>#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE

Officer Resignation

T BROWN MAY 2 1 2004

TRANSMITTAL LETTER

SUBJECT: ACTION KIDS CORP.
(Name of Corporation)
DOCUMENT NUMBER: P02000014825
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
WOLF TAUBENFELD
(Name of Person)
ACTION KIDS CORP.
(Name of Firm/Company)
1445-B NW 40th AVENUE
(Address)
LAUDERHILL, FL 33313
(City/State and Zip Code)
For further information concerning this matter, please call:
ABRAHAM TAUBENFELD 954 327-0630
ABRAHAM TAUBENFELD at (954) 327-0630 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	/ DIRECTOR RESIGNA OR A CORPORATION	ATION O4 TASECAR	MAY 17 AM 10:05
I, WOLF TAUBENFELD	hereby resign as_	President/Director (Title)	E.F.STATE
of_ ACTION KIDS CORP. (Nam	e of Corporation)		· ·
PO2000014825 (Document Number, if known)	, a corporation organized unc	der the laws of the Stat	te of
FLORIDA	-		_

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