## PD2000023198

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	∍ #)
PICK-UP	WAIT	MAIL
(Ві	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	



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ALLAHASSEF FINIE

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BIRD CAGE WAREHOUSE OUT LET INC. (Name of Corporation)
DOCUMENT NUMBER: PO2000 23198
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
OCTAVIO A DESCALZO (Name of Person)
(Name of Firm/Company)
(Address)
HIALEDH, FL 33014 (City/State and Zip Code)
For further information concerning this matter, please call:
ANA MOLECA Ivo Perez at (305) 821-9858 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, OCTAVIO A DESCALO, hereby resign as P.			
(1	(itle)		
of BIRN CAGE WAREHOUSE OUT LET JUC (Name of Corporation)		······································	
(Rocument Number, if known), a corporation organized under the laws of the	e State of	i	
Florida.			
(Signature of resigning officer/director)	SECT	03.0	
	SECRETARY C TALLAHASSEE,		
FILING FEE IS \$35.00	)F STATE FLORIDA		

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

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