P02000055071

(Req	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bus	iness Entity Nar	me)
(Doc	:ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



600134114386

08/14/08--01023--007 **35.00

Of / Ris Lesign

DO AUG IL PM PO 192

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: GAICER DISTRIBUTORS INC
(Name of Corporation)
DOCUMENT NUMBER: P02000055071
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
GABRIEL A CEREZO SR
(Name of Person)
GAICER DISTRIBUTORS INC
(Name of Firm/Company)
5409 B SOUTHER COMFORT BLVD
(Address)
TAMPA, FL. 33634
(City/State and Zip Code)
For further information concerning this matter, please call:
PHILIP J TESTA at (813) 877-9615 (Name of Person) (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



GABRIEL A CEREZO SR	, hereby resign as PRESIDENT
,	(Title)
GAICER DISTRIBUTORS IN	IC ,
(Nan	ne of Corporation)
P02000055071	, a corporation organized under the laws of the State of
(Document Number, if known)	•
FLORIDA	

FILING FEE IS \$35.00

ture of resigning officer/director)

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

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