02000061073

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) : Certified Copies Certificates of Status	(Requestor's Name)				
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) : Certified Copies Certificates of Status					
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
PICK-UP WAIT MAIL (Business Entity Name) . (Document Number) : : Certified Copies Certificates of Status	(Address)				
PICK-UP WAIT MAIL (Business Entity Name) . (Document Number) : : Certified Copies Certificates of Status					
(Business Entity Name) . (Document Number) : . Certified Copies Certificates of Status	(City/State/Zip/Phone #)				
(Business Entity Name) . (Document Number) : . Certified Copies Certificates of Status					
(Document Number) : Certified Copies Certificates of Status	PICK-UP WAIT MAIL				
(Document Number) : Certified Copies Certificates of Status					
Certified Copies Certificates of Status	(Business Entity Name)				
Certified Copies Certificates of Status					
Certified Copies Certificates of Status	(Document Number)				
	:				
	Certified Copies Certificates of Status				
Special Instructions to Filing Officer:					
Special instructions to Filing Officer:	0 11 1 5 5 5 6				
	Special Instructions to Filing Officer:				
·	,				

Office Use Only



900097673609

04/23/07--01026--027 **35.00

COVER LETTER

Division of Corporations
SUBJECT: PAC- SAM INVESTMENT CORP. (Name of Corporation)
DOCUMENT NUMBER: P020000 61073
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SAMUELS. FORMAN (Name of Person)
PAC-SAM INVESTMENT CORP. (Name of Firm/Company)
7115 Nw 10 Av. (Address)
MIAM FL 33150 (City/State and Zip Code)
For further information concerning this matter, please call:
SAMUEL TORMAN at (305) 691-7777 (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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, FRANCISO MARTINEZ (DE G/RO, hereby resig	gn as PRESIDEN	T IRECTOR
of PAC-SAM IN	VESTMENT (ORPORATION	
P02000061073 (Document Number, if known)	, a corporation organiz	zed under the laws of t	he State of
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

07 APR 23 AH 9: 5
SECRETARY OF STATE

APPROVEI