P02000069658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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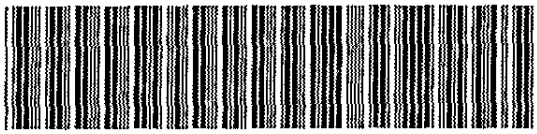

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03 JAN 24 PM 10:05

Off Resign
T. Lewis 1/24/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Central Digital Chiropractic, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000069658

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

Please return all correspondence concerning this matter to the following:

Jean R. Pierre
(Name of Person)

The Central Digital Chiropractic Clinic, INC.
(Name of Firm/Company)

4123 S. Orange Blossom Trail
(Address)

Orlando, FL 32839
(City/State and Zip Code)

For further information concerning this matter, please call:

Jean R. Pierre at (407) 487-0200
(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

CR2E044(11/02)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, Jennie Romain, hereby resign as Chief Executive Officer
(Title)

of The Central Digital Chiropractic Clinic, INC.
(Name of Corporation)

_____, a corporation organized under the laws of the State of
(Document Number, if known)

_____.

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03 JAN 24 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, 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