

PO2000081479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Veronica Andrade **CAVE**

AUTHORIZATION BY PHONE TO

CONTACT

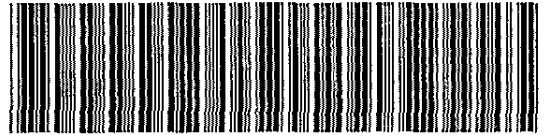
Corp. Name

DATE

12/14/04

300.0000

Office Use Only



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12/10/04--01074--004 **192.50

FILED
04 DEC 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resign.

12/14/04

DC

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Andrade Realty Group
(Name of Corporation)

DOCUMENT NUMBER: PO 2000081479

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Veronica Andrade
(Name of Person)

Andrade Realty Group
(Name of Firm/Company)

9809 Pines Blvd
(Address)

Pembroke Pines FL 33084
(City/State and Zip Code)

For further information concerning this matter, please call:

Veronica at (954) 442 2424
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Angela Andrade

(Name of Registered Agent)

hereby resigns as Registered Agent for

Andrade Realty Group, Inc.

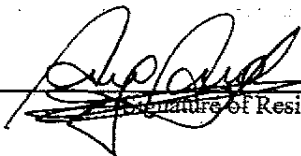
(Name of Corporation)

202000081479

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

Angela Andrade

(Typed or Printed Name)

(Capacity)

FILED
04 DEC 10 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314