P02000084116



(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:		

Office Use Only



200018001582

05/09/03--01093--002 **35.00

Of D reing.

TRANSMITTAL LETTER

	Amendment Section Division of Corporations
SUBJE	ECT: L.T.W. LIMITED, INC (Name of Corporation)
DOCU	MENT NUMBER: P02000084116
The end	closed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please 1	return all correspondence concerning this matter to the following:
MAJE	ED HAMDAN
	(Name of Person)
L.T.W	/. LIMITED, INC.
	(Name of Firm/Company)
4262	NORTHLAKE BLVD
	(Address)
PALM	MBEACH GARDENS, FL 33410
	(City/State and Zip Code)
For furt	ther information concerning this matter, please call:
MAJE	D HAMDAN af (561) 601-7940
	D HAMDAN at (561) 601-7940 (Name of Person) (Area Code & Daytime Telephone Number)
Enclose	ed is a check for \$35.00 made payable to the Florida Department of State.
Amenda Division P.O. Bo	g Address: ment Section n of Corporations ox 6327 ssee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



T. AMJAD HAMDAN	, hereby resign as PRESIDENT	
	(Title)	
of L.T.W. LIMITED, INC.		
(Name	of Corporation)	
P02000084116	a corporation organized under the laws of the State of	
(Document Number, if known)		
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