P0200086670

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

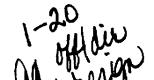




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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	JECT: P&M BROWARD MALL COOKIE, INC.		
5020	(Name of Corporation)		
DOC	UMENT NUMBER: P02000086670		
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please	e return all correspondence concerning this matter to the following:		
Darr	ryl S. Schreiber, Esquire		
	(Name of Person)		
Sch	reiber, Schreiber & Schreiber, P.A.		
	(Name of Firm/Company)		
560	3 Sheridan Street		
	(Address)		
Holly	ywood, FL 33021		
	(City/State and Zip Code)		
For fu	orther information concerning this matter, please call:		
Darry	(Name of Person) at (954) 966-5600 (Area Code & Daytime Telephone Number)		
	(Name of Person) (Area Code & Daytime Telephone Number)		
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.		
Amen Divisi P.O. I	ng Address: Idment Section Ion of Corporations Sox 6327 Inassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. MOHAMMED ALAMGIR	, hereby resign as Vice President
7	(Title)
of_P&M BROWARD MALL COOKIE, INC	
(Name of Corpora	tion)
P02000086670, a corpo	oration organized under the laws of the State of
Florida	
Mars of (Signature of	Tresigning 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