# Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6390

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694 Fax Number : (305)633-9696

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

### COR AMND/RESTATE/CORRECT OR O/D RESIGN GONTAX, CORP

Certificate of Status	0
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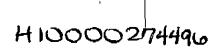
#### **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

SUBJECT: GONTAX CORP	
SOBSECT	(Name of Corporation)
DOCUMENT NUMBER: P02000	0090579
The enclosed Officer/Director Resigna	ation for a Corporation and fee are submitted for filing
Please return all correspondence conce	erning this matter to the following:
JAIRO GONZALEZ	
(Name of Person	
GONTAX, CORP	
(Name of Firm/Comp	pany)
13574 Village Park Dr. Suite 135	
(Address)	
ORLANDO, FL 32837	
(City/State and Zip C	Code)
For further information concerning this	s matter, please call:
JAIRO GONZALEZ	at (407) 251-6266 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made p	payable to the Florida Department of State.
Amendment Section Division of Corporations Clifton Building	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

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CR2E044(01/05)



# OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. JAIRO GONZALEZ	, hereby resign as PRESIDENT	
·,	(Title)	
of_GONTAX, CORP_		
(Nam	e of Corporation)	
03-0480108 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
,	<del></del>	
- fin	THE SECRETARY OF STATE ASSEE, FLOR	

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

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