

P02000104598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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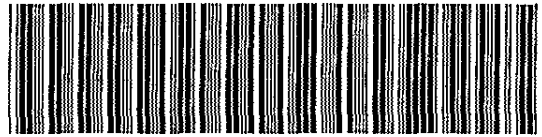
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
FALLS CHURCH, VA

Off Resign
T. Lewis 12/4/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Florida Wellness Center, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P02000104598

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

Please return all correspondence concerning this matter to the following:

Dmitry Shteyman
(Name of Person)

South Florida Wellness Center, Inc.
(Name of Firm/Company)

951 NE 167th Str. #205
(Address)

N. Miami Bch, FL 33160
(City/State and Zip Code)

For further information concerning this matter, please call:

Dmitry Shteyman at (305) 999-9876
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
03 DEC -1 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Victoria Filenger, hereby resign as Secretary & Tres.
(Title)

of South Florida Wellness Center, Inc.
(Name of Corporation)

002000104598, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Victoria Filenger
(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