

PD2000121098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

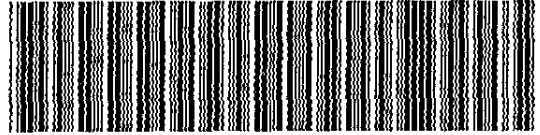
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T BROWN AUG 12 2003

officer Resignation

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Antilles Mortgage Corp.
(Name of Corporation)

DOCUMENT NUMBER: P02000121098

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

Please return all correspondence concerning this matter to the following:

Carrie R. Hesco

(Name of Person)

Carrie R. Hesco, P.A.

(Name of Firm/Company)

P.O. Box 352411

(Address)

Palm Coast, FL 32135

(City/State and Zip Code)

For further information concerning this matter, please call:

Carrie R. Hesco

(Name of Person)

at (386) 445-1701

(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**

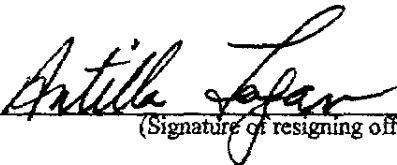
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Antilla Faqan, hereby resign as President
(Title)

of Antilles Mortgage Corp.
(Name of Corporation)

P02000121098, 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