# P02000130261

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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 28, 2005

Luis Beltran San Diego Photo Lab, Corp. 10200 NW 25th Street, Suite 202 Miami, FL 33172

SUBJECT: SAN DIEGO PHOTO LAB, CORP.

Ref. Number: P02000130261

We have received your document for SAN DIEGO PHOTO LAB, CORP. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne Senior Section Administrator

Letter Number: 205A00043563

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## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SAN DIECO PHOTO LAB CORP (Name of Corpóration)
DOCUMENT NUMBER: P- 02 0000130261
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)  SAN DIECE PHOTO LAB CORR  (Name of Firm/Company)
40 200 NW 25" STREET -STE 20 Z
(Name of Firm/Company)  (Name of Firm/Company)  (Name of Firm/Company)  (Name of Firm/Company)  (Address)  (Address)  (Address)  (City/State and Zip Code)  For further information concerning this matter, please call:
LUIS BELTRAN at (305) 245-3465 (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

TO: Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

# OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	14000	BELTRAN	, here	by resign as	DIRE	<u> </u>	<del></del> -
of	SAN	Diego (Nam	PIFOTO L ne of Corporation)	AB, COR	<u>P.</u>		
P_	0 20000 (Document Nu	130 26 1 mber, if known)	, a corporation	organized und	er the laws of	the State of	
	FLORID.	<u>a</u>					
			(Signature of resigning	ng officer/directo	r)	SECRETARY OF TALLAHASSEE, F	
						AM II: 39 Ur State E. Florid	O

### 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