P020001307E

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



500036469455

05/28/04--01011--007 **35.00

05/28/04--01011--008 **35.00

Resignation of

FILED

SECRETARY OF STATE
AND ANASSEE FLORIDA

MR 6/9/04

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Westport Distribute	or, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: P0	2000130748
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
Audrius Bakanas	
(Name of Pe	erson)
Westport Distributor, Inc	
(Name of Firm/C	Company)
2315 N.W. 107th Ave # 83	
(Address	\$)
Miami, Fl. 33172	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
Audrius Bakanas	at (786) 539-0500 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade 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

	/ DIRECTOR RESIGNATION	
I, Emilio J. García	, hereby resign as_	President / Owner (Title)
of Westport Distributor, Inc	ne of Corporation)	,
P02000130748 (Document Number, if known)	, a corporation organized un	der the laws of the State of
Florida		
	(Signature of regioning of ligar/direct	ton

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