

PO3 0000006365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

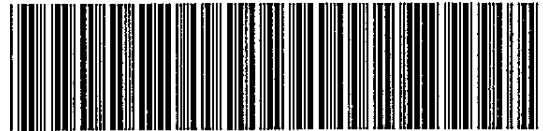
(Business Entity Name)

(Document Number)

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7/29

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA CELLULOID INC
(Name of Corporation)

DOCUMENT NUMBER: 803000006361

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

Please return all correspondence concerning this matter to the following:

SAMUEL QUESADA
(Name of Person)

FLORIDA CELLULOID INC
(Name of Firm/Company)

698 NE 167TH ST
(Address)

N. MIAMI BEACH, FL 33162
(City/State and Zip Code)

For further information concerning this matter, please call:

JACOB KAHNOWITZ at (954) 925-4060
(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**

I, MOSCHÉ FINKE, hereby resign as DIRECTOR
(Title)

of FLORIDA CELLULAR INC
(Name of Corporation)

9003000006365, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Mosché Finkel
(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL 26 PM 2:37

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