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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lakes Protective Service Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Hermilia Varquez
(Name of Person)

Lakes Protective Service Inc.
(Name of Firm/Company)

6784 Orchid dr.
(Address)

Miami Lakes, FL 33014
(City/State and Zip Code)

For further information concerning this matter, please call:

Hermilia Varquez at (305) 986-3419
(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

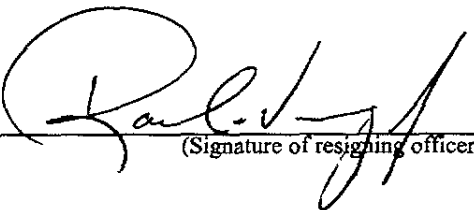
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I, RAUL VAZQUEZ, hereby resign as President - Director
(Title)

of Lakes Protective Service Inc.,
(Name of Corporation)

_____, 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