

P03000042231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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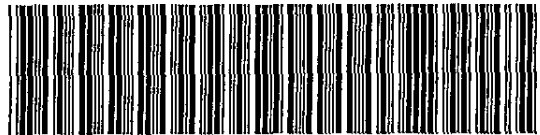
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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a/p Res
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HABIA INC

(Name of Corporation)

DOCUMENT NUMBER: P03000042231

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

Please return all correspondence concerning this matter to the following:

NIGEL MAROZHE

(Name of Person)

HABIA INC

(Name of Firm/Company)

317 1/2 21ST AVE SOUTH

(Address)

ST PETERSBURG, FL 33705

(City/State and Zip Code)

For further information concerning this matter, please call:

NIGEL MAROZHE

(Name of Person)

at (727) 553 9114

(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, RAQUEL HERMIDA, hereby resign as TREASURER/DIRECTOR
(Title)

of HABIA INC
(Name of Corporation)

P03000042231, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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