## P0300051544

;	
(Requestor's Name)	
(Address)	
. ,	
(4)	:
(Address)	i i
(City/State/Zip/Phone #)	ı
	! : !
PICK-UP WAIT	MAIL MAIL
(During a Fulfit Name)	i
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
•	
	·
Special Instructions to Filing Officer:	
	<u>:</u>

Office Use Only



100040116551

08/30/04--01013--009 \*\*35.00

04 AUG 30 PM 1: 45

m= 12

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	; ,
SUBJECT: IBROX, INC	
SCOOLET.	(Name of Corporation)
DOCUMENT NUMBER:PO	3000051544
The enclosed Officer/Director Res	ignation for a Corporation and fee are submitted for filing
Please return all correspondence of	oncerning this matter to the following:
IVAN PHILLIPS	· · · · · · · · · · · · · · · · · · ·
(Name of Pe	rson)
IBROX, INC	
(Name of Firm/	Company)
1852 40TH TERR SW	1
(Address	3)
NAPLES, FL 34116	;
(City/State and Z	Zip Code)
For further information concerning	g this matter, please call:
DIAN EDWARDS	at (239-4+) 455-70×7 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	de payable to the Florida Department of State.
•	property of the second
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

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. IVAN PHILLIPS	hereby resign as PRESIDENT/DIRECTOR
	(Title)
of IBROX, INC	and the second s
(Nar	me of Corporation)
P03000051544	a corporation organized under the laws of the State of
(Document Number, if known)	
FLORIDA	
* /	O4 AUG 30 PM 1: 45  O4 AUG 30 PM 1: 45

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 Tailahassee, Florida 32314