

PD3000057617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

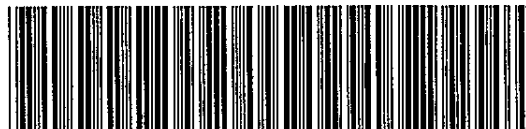
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600031320286

04/02/04--01060--004 **35.00

FILED
04 APR -2 PM 1:10
TALLAHASSEE, FLORIDA

CD / Res
10 4/8/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GLADYRA OF FLORIDA INC
(Name of Corporation)

DOCUMENT NUMBER: P03000057617

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

Please return all correspondence concerning this matter to the following:

ENRIQUE SERRANO

(Name of Person)

BILINGUAL AUTO DEALER SCHOOL

(Name of Firm/Company)

1515 NW 167 STREET

(Address)

MIAMI, FL 33169

(City/State and Zip Code)

For further information concerning this matter, please call:

ENRIQUE SERRANO

(Name of Person)

at (305) 625-4666

(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

FILED
04 APR -2 PM 1:10
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GLADYS SOLIS, hereby resign as PRESIDENT
(Title)

of GLADYRA OF FLORIDA INC
(Name of Corporation)

P03000057617, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Gladys Solis
(Signature of resigning officer/director)

FILED
04 APR -2 PM 1:10
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