

P030000061542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

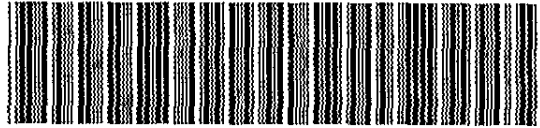
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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ENDEAVOR TITLE CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000061542

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

Please return all correspondence concerning this matter to the following:

Helen J. FIGUEROA  
(Name of Person)

ENDEAVOR TITLE CORP  
(Name of Firm/Company)

4625 SW 147 CT  
(Address)

MIAMI, FL. 33185  
(City/State and Zip Code)

For further information concerning this matter, please call:

Helen FIGUEROA at ( 786 ) 356-9934  
(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, MARIA KABA, hereby resign as Treasurer  
(Title)

of ENDLAW TITLE CORP  
(Name of Corporation)

P 03000061542, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Maria Kaba  
(Signature of resigning officer/director)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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