P03000062920

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Only old or Lips Hollow)	
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(Business Entity Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations	\(\frac{1}{2}\)
SUBJECT: SONIA TAX & TRAVEL SERVICES INC	/
(Name of Corporation)	
DOCUMENT NUMBER: P03000062920	r
The enclosed Officer/Director Resignation for a Corporation and fe	ee are submitted for filing.
Please return all correspondence concerning this matter to the follo	wing:
SONIA R. VASQUEZ	, (*) (*)
(Name of Person)	,
SONIA TAX & TRAVEL SERVICES INC	
(Name of Firm/Company)	
1141 W COLUMBIA AVE	
(Address)	
KISSIMMEE, FL 34741	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SONIA R. VASQUEZ (Name of Person) at (321) 388 (Area Code & Day	-8855
(Name of Person) (Area Code & Day	ytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Depart	ment of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

CR2E044(08/05)

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

TALEGRADOR TO AMO. 4

I, SALLY G. MADURO	, hereby resign as VICE-PRESIDENT
	(Title)
of SONIA TAX & TRAVEL SERVIC	EŞINC.
(Name of	Corporation)
P03000062920	a corporation organized under the laws of the State of
(Document Number, if known)	e.
FLORIDA	<i>:</i> ,

(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