P03000067510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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P03000067510
3 CR OD Rs
9-29-03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CM & ASSOCIATES GROUP, INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000067510

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

Please return all correspondence concerning this matter to the following:

CARIDAD ESTALELLA
(Name of Person)

CM & ASSOCIATES GROUP, INC.
(Name of Firm/Company)

100 CALABRIA AVENUE, UNIT B
(Address)

CORAL GABLES, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

CARIDAD ESTALELLA at (305) 456-2292
(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

CR2E044(11/02)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, CARIDAD ESTALELLA, hereby resign as DIRECTOR
(Title)

of CM & ASSOCIATES GROUP, INC.
(Name of Corporation),

P03000067510
(Document Number, if known), a corporation organized under the laws of the State of

FLORIDA.

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TALLAHASSEE, FLORIDA

(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