P03000071459

(D-		
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
Special filsuluctions to r	-tiling Officer.	

Office Use Only



400025396704

12/15/03--01064--014 **35.00



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Consolidated Thesources Internationa (Name of Corporation) DOCUMENT NUMBER: P03000071459	1 Inc.
2000 Marie Trombani	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	4. Q
Ivonne Cohen (Name of Person)	O3 DEC 15 PH 1: 55
(Name of Person)	瑟万万
	SEE SEE
(Name of Firm/Company)	四二
7205 n.w. 173rd Drive unit 611 (Address)	NATE ORIDA
MIRMI FC 33015 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Tyonne Cohen at (305) 773-6030 (Area Code & Daytime Telephone Number)	
Enclosed is a check for \$35.00 made payable to the Florida Department of State.	

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Z3.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ivonne Cohen, hereby resign as VICE President	÷
of Consulidated Presurces International, Inc.	
P03000071459, a corporation organized under the laws of the State of (Document Number, if known)	
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