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(Requestor's Name)									
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(Business Entity Name)									
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Certified CopiesCertificates of Status									
Considerations to Filip Office									
Special Instructions to Filing Officer:									

Office Use Only



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09/20/04--01038--008 **35.00

O4 SEP 17 AH 8: 22 SECRETARY OF STATE TALLAHASSEE, ELGAN

DFF. Resegn.

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	:
SUBJECT: TNR INC (Name of Corporation)	
DOCUMENT NUMBER: P03000075771	,
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili	ng
Please return all correspondence concerning this matter to the following:	
Jose MAYA (Name of Person)	r 5
	:
TNR INC (Name of Firm/Company)	.i
	:
777 NW 72 AVE II 3613 (Address)	ì
	1
MIANIFL 33126 (City/State and Zip Code)	:
For further information concerning this matter, please call:	,
	:
To SE MAYA at (305) 266-2339 (Name of Person) (Area Code & Daytime Telephone Number	ĵ
	1
Enclosed is a check for \$35.00 made payable to the Florida Department of State.	i
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	
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CR2E044(11/02)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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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