## 703000077005

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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03 NOV 20 AM 8: 25

0/15 Resign.
M/M
11/25/03

## TRANSMITTAL LETTER

TO: Amendment S Division of Co				
SUBJECT: Schape	row Real Esta	nte, Inc.	of Corpora	ation)
DOCUMENT NUM	BER: P0300	00077005	or corpor	ation)
	<del></del>	nation for a Co	rporation	and fee are submitted for filing
Please return all corre			_	
Eli Schaperow				
	(Name of Person	n)	<del></del>	=-
Schaperow Real E	state, Inc.			
(N	ame of Firm/Com	npany)		
793 E. Normandy	Blvd.			
	(Address)			.· .
Deltona FL 32725				
(C	ity/State and Zip	Code)		
For further information	on concerning th	nis matter, plea	ase call:	
Eli Schaperow		at (	386	) 574-2670 e & Daytime Telephone Number)
(Name	e of Person)		Area Code	& Daytime Telephone Number)
Enclosed is a check f	or \$35.00 made	payable to the	: Florida l	Department of State.
Mailing Address: Amendment Section Division of Corporati P.O. Box 6327 Tallahassee FL 3231		Street Addre Amendment S Division of C 409 E. Gaines Tallahassee, J	Section orporation Street	

TO:

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I.</sub> Mary Schaperow	, hereby resign as Vice Pres., Secretary, Treasure		
7	(Title)		
of Schaperow Real Estate, Inc.			
	Corporation)		
P03000077005	, 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