## P03000091014

(Re	questor's Name)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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HIN 14 PH 4: ? TRANSMITTAL LETTER TO: Amendment Section **Division of Corporations** TRANS ATLANTIC WIRELESS INC. (Name of Corporation) SUBJECT: DOCUMENT NUMBER: <u>P0300091014</u> The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Person) (Name of Firm/Company) 12839 NW 1816- CT (Address) PEMBRIKE PINES FL. 33028 (City/State and Zip Code) For further information concerning this matter, please call: (Name of Person) at (954) 270 7049 (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Mailing Address:</u> 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

JAMAN IL PH L. **OFFICER / DIRECTOR RESIGNATION** FOR A CORPORATION I, <u>ROBERT CHIRA</u>, hereby resign as <u>V.P</u> (Title) of <u>TRANS ATLANTIC</u> WIRELESS /NC., (Name of Corporation)  $\frac{PO30000091014}{(\text{Document Number, if known)}}$ , a corporation organized under the laws of the State of FLORIDA.

 $\frac{\partial A}{\partial F} = \frac{\partial A}{\partial F} = \frac{\partial A}{\partial F}$ f 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