## P03000107413

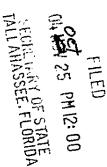
(Requestor's Name)
(Address)
( Mail 2 2 2)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500041771305

10/25/04--01014--019 \*\*35.00



0/presig.

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: C.P. Exports INC (Name of Corporation)
DOCUMENT NUMBER: POSOCO107413
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANA PENA (Name of Person)
C. P. Exports Inc (Name of Firm/Company)
1412 Plantation Circle Sp# 904 (Address)
Plant City, Florida 33566 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (813) 495-1921 (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

TO:

**Amendment Section** 

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

04 NOV 25 PM 12: 00 SECKLIARY OF STATE TALLAHASSEE, FLORIDA

## 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