P0300/20246

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





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Africar Resignation
17-04

TRANSMITTAL LETTER

SUBJECT: SASA WHOLE SAVE INC Name of Corporation) DOCUMENT NUMBER: 103000120246
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) 8105 ANGLERS POWTDR (Address)
TENIPLE TERRACE, FL 33637 (City/State and Zip Code)
For further information concerning this matter, please call:
OSAMA S VAMALI CM at (813) 879-9642 (Name of Person) (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

Amendment Section Division of Corporations

TO:

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

SECRETARY OF STATE DIVISION OF CORPORATION

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2004 AUG | | PM |: 58

I, KHALIL ALQAN	1 hereby resign as President Director
	MESALE INC.
P03000120246	of Corporation), a corporation organized under the laws of the State of
(Document Number, if known)	

gnature 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