

P03000133385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

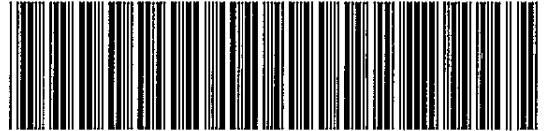
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700053635547

resignation

to officer

05/13/05--01013--007 **210.00

RECEIVED
05 MAY 13 AM 9:47
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
MAY 13 PM 3:04
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

5/13/05

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Bright Star Medical Equipment & Supply
(Corporation Name) (Document #) P030001333
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**RESIGNATION OF OFFICER AND DIRECTOR
AFFIDAVIT**

FILED
05 MAY 13 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, personally appeared, **Julio C. Gil**, who upon being first duly sworn, says the following:

- 1) That I, **Julio C. Gil**, have resigned as Vice President of:
BRIGHT STAR MEDICAL EQUIPMENT & SUPPLIES, INC., a Florida Corporation.
2. That the corporation has been notified in writing of the resignation.

FURTHER AFFIANT SAYETH NAUGHT:



Julio C. Gil

Sworn to and subscribed before me this 11th day of May of the year 2005.

The undersigned notary public specifies that the affix signature being notarized and that the affiant personally appeared before the notary at the time of notarization. Affiant is personally known to me or has furnished the following documentation for verification FL. D/c as identification.



NOTARY PUBLIC