

PD3000144048

(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



100171220101

03/08/10--01040--003 **35.00

10 MAR -8 AM 9:31
T. H. A. L.
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OD/RES
@ 3/10/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EUROPEAN IMMIGRATION&TRANSLATION CONSULTANTS,INC
(Name of Corporation)

DOCUMENT NUMBER: P03000144048

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anna Pinkhasov

(Name of Person)

(Name of Firm/Company)

200 Diplomat Pkwy #523

(Address)

Hallandale FL 33009

(City/State and Zip Code)

For further information concerning this matter, please call:

Anna Pinkhasov

(Name of Person)

at (786) 303-6464

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

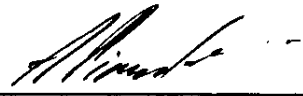
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Anna Pinkhasov, hereby resign as MB
(Title)

of EUROPEAN IMMIGRATION & TRANSLATION CONSULTANTS, INC
(Name of Corporation)

P03000144048, 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

10 MAR - 8 AM 9:31
STATE DEPT OF STATE
TALLAHASSEE, FLORIDA