

PO3000144773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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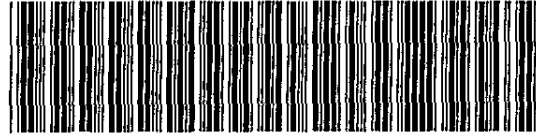
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

officer Resignation

T BROWN DEC - 8 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: I.A. ROMERO LAPH-STUCCO, INC
(Name of Corporation)

DOCUMENT NUMBER: P03000144773

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

Please return all correspondence concerning this matter to the following:

ROBERTO ROMERO

(Name of Person)

I.A. ROMERO LAPH-STUCCO INC

(Name of Firm/Company)

8401 BOWLES RD LOT 1

(Address)

TAMPA, FL 33637-2506

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERTO ROMERO

(Name of Person)

at (813) 917 - 7335
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
04 DEC -3 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, GABINO CORDOVA, hereby resign as SECRETARY
(Title)

of I.A.ROMERO LAPH-STUCCO INC.
(Name of Corporation)

P03000144773, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

X GABINO CORDOVA
(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