P03000154904

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: P.R. Medical Equipment Inc. (Name of Corporation)
DOCUMENT NUMBER: P03000154904
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pedro Casado (Name of Person)
P.R. Medical Eggipment, Inc.
921 SU 27 Ave Ste A-1 (Address)
Miam? FL 33/35 (City/State and Zip Code)
For further information concerning this matter, please call:
Pedro Casado at (305) C49 - 7/// (Name of Person) (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

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ruban A Herna	ndez hereby resign as Dir	ector (Title)
of P.R. Medical	Equipment, Inc.	
P03000154904 (Document Number, if known)	, a corporation organized under the law	s of the State of
Florida		OS F
	2	FEB-1 LAHASSE
	Signature of resigning officer/director)	AM 8: 35 EFFLORIE

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