

P04000016327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

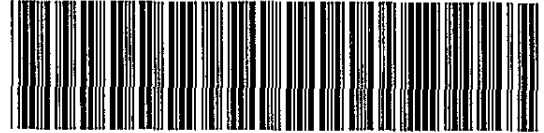
(Business Entity Name)

(Document Number)

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10/15/04

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Angel Arts Signs, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000016327

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

Please return all correspondence concerning this matter to the following:

Oscar Soriano

(Name of Person)

Angel Arts Signs, Inc.

(Name of Firm/Company)

P.O. Box 7273

(Address)

Jacksonville, FL 32238

(City/State and Zip Code)

For further information concerning this matter, please call:

Oscar Soriano

(Name of Person)

at ( 904 ) 993-4379

(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

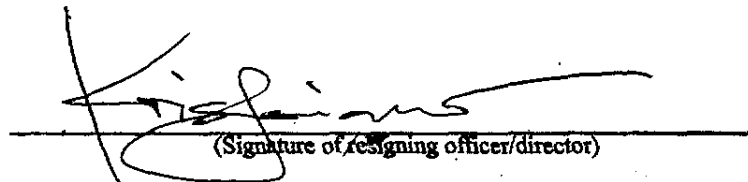
04 OCT 15 PM 12:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, KRIS SANDER M. SORIANO, hereby resign as Director  
(Title)

of Angel Arts Signs, Inc.  
(Name of Corporation)

P04000016327, 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