Po40034819	
(Requestor's Name) (Address) (Address)	400041777014
(Ćity/State/Zip/Phone #)	10/29/0401019005 **35.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	DL OCT 29 AM 11: 42 ALLANASSEE, FLORIDA
Office Use Only	Rs 1/2/04 plples.

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

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MARKALING . Inc. (Name of Corporation) truovis SUBJECT: DOCUMENT NUMBER: 104000034519

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

Please return all correspondence concerning this matter to the following:

Erry Bartlett (Name of Person) Annors Marketing Inc. (Name of Firm/Company) #3.5 4601 W-Kennedy Blue (Address) CI 33609 (City/State and Zip Code) lampa

For further information concerning this matter, please call:

Jerry Bort 16+4 at (305) 498 2004 (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 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E044(11/02)

	R / DIRECTOR RESIGNATION OR A CORPORATION	FILED 04 OCT 29 AM II: 42 ALLAHASSEE. FLORIDA
1. William Maltero	, hereby resign as $\vee \mathcal{P}$	(Títle)
Poy 0000 3 41 979 (Document Number, if known) <u>flarit</u>	, a corporation organized under the law	ws of the State of
<u>tern</u>	(Signature of resigning officer/director)	
	FILING FEE IS \$35.00	
Make checks payab	le to Florida Department of State and 1	nail to:
	Amendment Section Division of Corporations P.O. Box 6327	

5.**#**