

P0400 0037599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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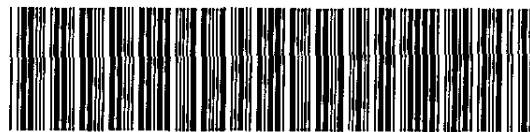
(Business Entity Name)

(Document Number)

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04 JUN 17 09:11:00  
FBI - NEW YORK

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: VERSAILLES SUPERMARKET, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P04000037599

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

Please return all correspondence concerning this matter to the following:

LAWRENCE H. FEDER  
(Name of Person)

N/A  
(Name of Firm/Company)

3900 HOLLYWOOD BLVD. # 103  
(Address)

HOLLYWOOD, FL. 33021  
(City/State and Zip Code)

For further information concerning this matter, please call:

LAWRENCE H. FEDER at ( 954 ) 962 - 5571  
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 9, 2004

LAWRENCE H. FEDER, ESQ.  
3900 HOLLYWOOD BLVD., #103  
HOLLYWOOD, FL 33021

SUBJECT: VERSAILLES SUPERMARKET, INC.  
Ref. Number: P04000037599

We have received your document for VERSAILLES SUPERMARKET, INC. and check(s) totaling \$30.00. However, your check(s) and document are being returned for the following:

The fee to file your document is \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 704A00039111

6/15/04 15:10:29  
DIVISION OF CORPORATIONS

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
04 JUN 11 14 11:03  
TALLAHASSEE, FLORIDA

I, LAWRENCE H. FEDER, hereby resign as DIRECTOR  
(Title)

of VERSAILLES SUPERMARKET, INC.  
(Name of Corporation)

P04000037599, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA.



\_\_\_\_\_  
(Signature of resigning officer/director)  
LAWRENCE H. FEDER

**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