

PO240000 54625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

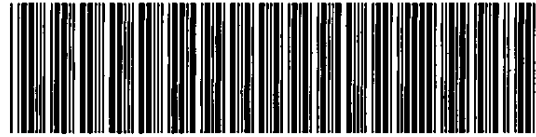
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

KH

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ELECTRONIC MICRO INTEGRATED DATA ACCESS SYSTEMS INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000054625

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

Please return all correspondence concerning this matter to the following:

JEFF LEE
(Name of Person)

ELECTRONIC MICRO INTEGRATED DATA ACCESS SYSTEMS INC.
(Name of Firm/Company)

6649 FOREST HILL BLVD.
(Address)

WEST PALM BEACH, FLORIDA 33413
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM PAGE at (407) 718-8046
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

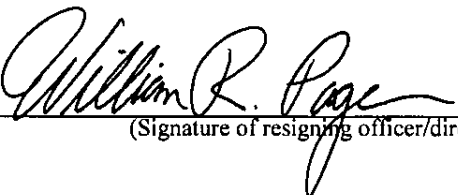
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, WILLIAM R. PAGE, hereby resign as PRESIDENT & CEO
(Title)

of ELECTRONIC MICRO INTEGRATED DATA ACCESS SYSTEMS INC.,
(Name of Corporation)

P04000054625, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.

 SEPT. 5TH 2006
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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