P040000 59495

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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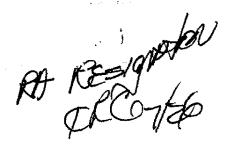
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07 JUL 25 PM 3: 01.
SECRETARY OF STATE.



FLORIDA ANNUAL REPORT SERVICES, INC.

2300 Coral Way, Suite 200 Miami, Florida 33145 Phone (305) 856-0056 Fax (305) 856-2030

July 24, 2007

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

Re: Resignation of Registered Agent

Dear Sir or Madam:

Enclosed please find the following 2007 Resignation of Registered Agent for a Corporation:

• INTERNATIONAL DISTRIBUTORS, INC

Please file accordingly, and if we can be of any further assistance, please do not hesitate to contact us.

Sincerely,

Florida Annual Report Services, Inc.

Vivian Williams Office Manager

VW/bm

Enclosure

07 JUL 25 AH 8: 00

COVER LETTER

Division of Corporations
SUBJECT: INTERNATIONAL DISTRIBUTORS, INC (Name of Corporation)
DOCUMENT NUMBER: P04000059495
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAZARO MARTINEZ (Name of Person)
INTERNATIONAL DISTRIBUTORS, INC (Name of Firm/Company)
2160 - B NW 8TH AVE. (Address)
MIAMI, FL 33173 (City/State and Zip Code)
For further information concerning this matter, please call:
LAZARO MARTINEZ at (305) 324-1021 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,			
Florida Statutes, the undersigned, <u>FLORIDA ANNUAL REPORT SERVICES</u> , INC (Name of Registered Agent)			
hereby resigns as Registered Agent for <u>INTERNATIONAL DISTRIBUTORS. INC.</u> (Name of Corporation)			
P0400059495 (Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known ad	dress.		
The agency is terminated and the office discontinued on the 31st day after the date on who this statement is filed. (Signature of Resigning Agent)	secre TALLA)	الال 07	
If signing on behalf of an entity:	TARY	25	FILED
VIVIAN WILLIAMS (Typed or Printed Name)	OF STATE	PM 3: 01	
Socratory			

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(Capacity)