P04000073402

(Requestor's Name)				
(Address)				
(Address)				
•				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
·				
(Document Number)				
Certified Copies Certificates of Status				
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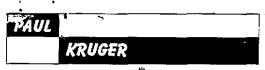
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SECRETARY OF STATE

OH. Losegi

G. Comilian SEP 2 7 2004

305-252-5023 (Office)



1346 NW 12th Street Homestead, FL 33030

Amendments Section **Division of Corporations**P.O. Box 6327

Tallahassee, FL 32314

Sirs:

Enclosed is my resignation from the corporation TROPICAL FUN CENTER INC. I am no longer associated with that business and was never a shareholder and have never had a financial interest in that business.

I was added to the corporation to facilitate management as the owner, who suffered a stroke, moved to New York state with his family leaving no principle located in the state.

Thank you.

Respectfully

Paul C. Kruger

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: TROPICAL FUN CENTER (Name of Corporation)
DOCI	UMENT NUMBER: P04000073402
The er	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Paul	C. Kruger
	(Name of Person)
	(Name of Firm/Company)
1346	S NW 12th Street
	(Address)
Hom	nestead, FL 33030
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Paul	Kruger at (305) 252-5023 (Tue - Fri) (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Ameno Divisio P.O. B	ng Address: dment Section on of Corporations Sox 6327 assee FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Paul C. Kruger	, hereby resign as Office/Secretary	
·,		(Title)
of Tropical Fun Center, Inc.		
(Na	me of Corporation)	
P04000073402 (Document Number, if known)	, a corporation organized under the law	s of the State of
Florida	.	
Can	(Signature of resigning officer/director)	O4 SEP 17 AM 7:50 SECRETARY OF STATE TALLAHASSEE, FLORING
	EILING DEE IS \$25.00 CHEC	ck # 6359

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314