

PO4000097829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

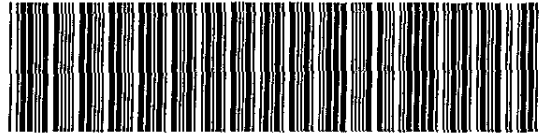
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600058585136

08/29/05--01018--008 **35.00

FILED
05 AUG 29 PM 12:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

00

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ULTIMATE APPRAISALS, INC
(Name of Corporation)

DOCUMENT NUMBER: P04000097829

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MARK FOO
(Name of Person)

ULTIMATE APPRAISALS, INC.
(Name of Firm/Company)

19241 NW 66TH COURT
(Address)

MIAMI, FL. 33169
(City/State and Zip Code)

For further information concerning this matter, please call:

MARK FOO at (305) 785-5119
(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

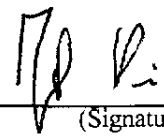
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOZSEF POOR, hereby resign as PRESIDENT/DIRECTOR
(Title)

of ULTIMATE APPRAISALS, INC.
(Name of Corporation)

P04000097829, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 08/23/2005
(Signature of resigning officer/director)

FILED
05 AUG 29 PM 12:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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