P04000/00320

(Requestor's Name)
(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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04/18/08--01012--017 ++35.00

2000 APR 18 PM 4: 19
SECRETARY OF STATE
ALLASSEE FLORIDA

officer Resignation

TB 4-73-08

COVER LETTER

SUBJECT: OCEANFRONT BROKERAGE, INC. (Name of Corporation)
_
DOCUMENT NUMBER: <u>P 04 000 0032 0</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Henry Keel (Name of Person)
Oceanfront Brokerabe (Name of Firm/Company)
101 North Riverside Drive # 113E (Address)
POMPANO BEACH, FL 33062 (City/State and Zip Code)
For further information concerning this matter, please call:
Henry Kee at (954) 689-9388 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section **Division of Corporations**

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

ZOOBAPR 18 PM 4: 19
TALLAHASSEE. FLORIDA

I, RAPHAEL A. DOM	INGUEZ hereby resign as Director (Title)
of OCEANFRONT (Name	BROKERAGE, INC.
P 0 4 0 0 0 1 0 0 3 2 0 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	·

(Signature of resigning officer/director)

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