P04000101338

(Re	questor's Name)	
	<u></u>	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	_Certificates	of Status
Special Instructions to F	Filing Officer:	
		[
		j
		ĺ
		1
		Į.
		ļ
<u></u>		

Office Use Only



300040823163

09/14/04--01045--005 **35.00

ALCHEMARY OF STATE OF THE PROPERTY OF THE PROP

Corto Corto

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Natural Beauty Solutions INC. (Name of Corporation)
DOCUMENT NUMBER: PO4000101388
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Sagy Trabelsi (Name of Person)
Natural Beauty Solutions INC (Name of Firm/Company)
3021 NE 72Nd Dr # 9-46 (Address)
Vancouver Wa 98661 (City/State and Zip Code)
For further information concerning this matter, please call:
Sagy Trabelsi at (508) 360-6435 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Eyal E	lya	, hereby	y resign as	Preside	Pitle)		
of	Natural	Beaut	y Soluti	ons, In	С.			
_F	(Document Number	1 388 r, if known)	_a corporation or	ganized unde	er the laws of th	e State of		
	Florida	<u> </u>	<u>.</u>	-	-			
		eya (s	ignature of resigning	officer/director)	ALL AHASSEE, FLORID	Ot SEP I 4 MID: O	

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