P04000101586

(Re	equestor's Name)	
. (Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

SUBJECT:_ANGELINA & KATRINA, INC. (Name of Corporation) P04000101586 DOCUMENT NUMBER: The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AKHNOUKH AKHNOUKH (Name of Person) ANGELINA & KATRINA, INC. (Name of Firm/Company) 2986 Shannon Circle (Address) Palm Harbor, FL 34684 (City/State and Zip Code) For further information concerning this matter, please call: Akhnoukh Akhnoukh at (727-) 463-3667 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Mailing Address: Amendment Section **Street Address:** Amendment Section **Division of Corporations** Division of Corporations Clifton Building Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, morcos k. zkaria 2 <i>a.</i>	, hereby resign as DV (Title)
of ANGELINA & KATRINA (Nam	ne of Corporation)
P04000101586 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	Simple of majories of majories of majories and majories of majorie
	(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