

P040000107952

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TALLAHASSEE, FLORIDA

10 SEP 27 AM 9:47

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EUREKA INSTITUTE OF HEALTH AND BEAUTY INC.

(Name of Corporation)

DOCUMENT NUMBER: P04000107952

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDIMIA M PESANTES

(Name of Person)

EUREKA INSTITUTE OF HEALTH

(Name of Firm/Company)

11373 W FLAGLER ST STE 309

(Address)

Miami, FL 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

EDIMIA M PESANTES

(Name of Person)

at (305) 480-1005

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

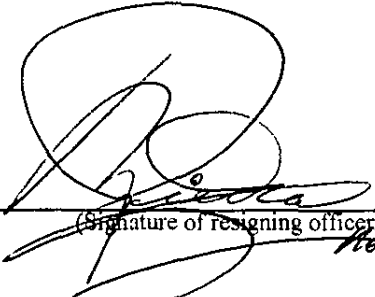
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ZORAIDA PIEDRA, hereby resign as VPSD
(Title)

of EUREKA INSTITUTE OF HEALTH AND BEAUTY INC.
(Name of Corporation)

P04000107952
(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