

PO4000118428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

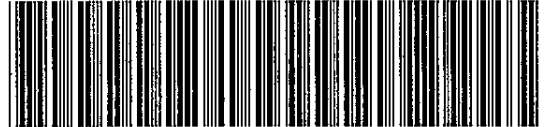
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500043647045

12/29/04--01023--002 \*\*70.00

2004 DEC 29 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Officer Resignation  
LPT  
1-6-05

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DREAMLOANSYES.COM, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P04000118428

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

Please return all correspondence concerning this matter to the following:

JACK A. LANDI  
(Name of Person)

DREAMLOANSYES.COM, INC.  
(Name of Firm/Company)

3986 INVERRARY DRIVE - T.H. #5A  
(Address)

LAUDERHILL, FL 33319  
(City/State and Zip Code)

For further information concerning this matter, please call:

DONNA R. KENNEDY at (954) 649-0317  
(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

FILED

OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

2004 DEC 29 PM 3: 22


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, JACK A. LANDI, hereby resign as PRESIDENT  
(Title)

of DREAMLOANSYES.COM, INC.  
(Name of Corporation)

P04000118428, a corporation organized under the laws of the State of  
(Document Number, if known)

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