## 204000128731

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ling Officer:	
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Office Use Only



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Old Resign.

02/20/06

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## **COVER LETTER**

Division of Corporations
SUBJECT: Fortport REAL Estate Mortgage & INV, Fine (Name of Corporation)  DOCUMENT NUMBER: P04000128731
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Luis A AndoTW Sr (Name of Person)
Fortport REAL Estate Mortgage & INV. Inc. (Name of Firm/Company)
1108 W Kennedy Blued (Address)
TAMPA, PI 33GOC (City/State and Zip Code)
For further information concerning this matter, please call:
Jorge Monzow at (813) 254-0267.  (Name of Person) (Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Luis A AnduTar	, hereby resign as <u>V. Q</u>	Prosider (Title)	<u>1</u>
of Fortport NEAL Estat. (Name of Corporation	e Mortgages	& FNVES	fmehts, I
P04000128731 , a corpor (Document Number, if known)	ation organized under the	laws of the State	of
Plovida.			
	•		
(Signature of i	esigning afficer/director)		SECRETARY SECRETARY DIVISION OF C

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