

P04000147028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

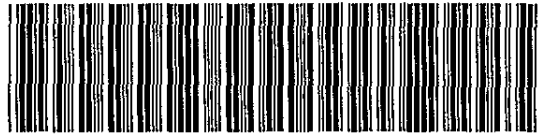
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/03/04--01029--027 **35.00

OFF. Resign

C. Coulllette DEC 08 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CABRAL & CARVALHO CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P04000147028

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

Please return all correspondence concerning this matter to the following:

PAULO GARCIA

(Name of Person)

CABRAL & CARVALHO CORPORATION

(Name of Firm/Company)

4224 MIDDLEBROOK RD. APT. 533

(Address)

ORLANDO FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

RUBEN D. TORO

(Name of Person)

at (407) 370-6445

(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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, PAULO GARCIA, hereby resign as DIRECTOR, TRASURER
(Title)

of CABRAL & CARVALHO CORPORATION,
(Name of Corporation)

P04000147028, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

FILED
04 DEC -3 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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