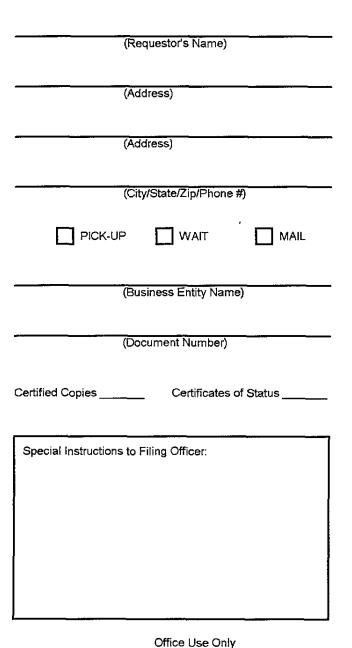
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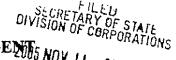
11/14/05--01043--007 **35.00

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Angel delight corp	20916 S Dixie Hwy,
	(Name of Corporation)
DOCUMENT NUMBER: Ange	IDel T 04000153105 "
The enclosed Resignation of Regis	tered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Maria Angelica Tap	ia
(Name of Per	son)
Angel delight corp	
(Name of Firm/Co	ompany)
12825 SW 207 Terrac	;e
(Address)	
miami ,florida 331	77
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Maria Tapia	at (30530) 254-2274 - 305-254-1687 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to \$35.00 for an administratively di	to the Florida Department of State for \$87.50 for an active corporation issolved, voluntarily dissolved or withdrawn corporation.
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



RESIGNATION OF REGISTERED AGENTS NOV 14 AM 9: 48

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, POLOOO 53 65 (Name of Registered Agent)
hereby resigns as Registered Agent for (Name of Corporation) (Name of Corporation)
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. (Signature of Resigning Agent)
If signing on behalf of an entity:
HARIA ANRICO TOPICA (Typed of Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314