

P04000158925

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

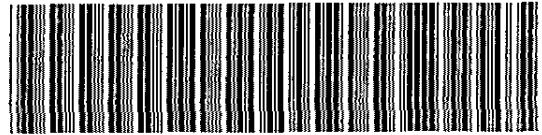
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Screen Professionals Inc
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Peter Bonnard
(Name of Person)

Screen Professionals Inc
(Name of Firm/Company)

5963 Dryden Rd
(Address)

West Palm Bch FL 33415
(City/State and Zip Code)

For further information concerning this matter, please call:

Charles Asher at (561) 632-5061
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Peter Bonsanti Jr., hereby resign as S.T.
(Title)

of Screen Professionals Inc.
(Name of Corporation)

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

Peter Bonsanti Jr.
(Signature of resigning officer/director)

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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