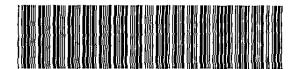
## P04000166053

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Duninggo Catity Name)				
(Business Entity Name)				
(Document Number)				
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OS JUN 29 PM 3: 08

06/29/05--01014--020 \*\*35.00

010 Resign. 07/07/05

## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	ECT: REALTY CENTER OF AMERICA CORP			
	(Name of Corporation)			
DOCUMENT NUMBER:	UMENT NUMBER: P04000166053			
The enclosed Officer/Director I	Resignation for a Corporation and fee are submitted for filing			
Please return all correspondenc	ee concerning this matter to the following:			
JOAQUIN COSSIC	OR YURI SAENZ			
(Name of	Person)			
REALTY CENTER O	F AMERICA CORP			
(Name of Fire	m/Company)			
5372 W 1	6 AVE.			
(Addı	ress)			
HIALEAH, F	EL 33012			
(City/State an	nd Zip Code)			
For further information concern	ning this matter, please call:			
JOAQUIN COSSIO OR Y	URI SAENZ at ( 305 ) 556-8191 (Area Code & Daytime Telephone Number)			
(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

B. B. C. B. F. Garage

I.	NORMAN DE LA CRUZ	_, hereby resign as	Officer and/or Director	
~, -			(Title)	
of_				
_	(Name of Corporati	on)	,	
	(Document Number, if known), a corpo	ration organized und	er the laws of the State of	
	FLORIDA			
	(Signature of	resigning officer/directo	SECRETARY OF STATE OF JUN 29 PM 3: 08	

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