## P04000167087

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
<u></u>		

Office Use Only



100055904911

06/13/05--01027--018 \*\*35.00

SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION

0/0 Resign.
06/15/05

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BABY BOSS INCORPORATED
(Name of Corporation)
DOCUMENT NUMBER: P04000167087
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
FELIPE SOSA
(Name of Person)
BABY BOSS INCOPORATED
(Name of Firm/Company)
10260 NW 3RD STREET
(Address)
PEMBROKE PINES, FL 33026
(City/State and Zip Code)
For further information concerning this matter, please call:
FELIPE SOSA at ( 954 ) 394-4804 (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:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

## , OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, FELIPE SOSA	, hereby resign as VICE-PRESIDENT (Title)		
DE BABY BOSS INCORPORA	ATED  Tame of Corporation)	_•	
P04000167087 (Document Number, if known)	, a corporation organized under the laws of the State of		
FLORIDA (	Signature of resigning officer/director)  OS JUN 13 PM 12: 07	SECRETARY OF STATE SIVISION OF CORPORATIONS	

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