(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL
(Ви	usiness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500057952035

08/01/05--01045--003 **35.00

TRANSMITTAL LETTER

1115 1111
SUBJECT: NARANJA PARK HOLDINGS, INC. (Name of Corporation)
DOCUMENT NUMBER: P05000002277
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
MANUEL M. ARVESU, P.A.
(Name of Person)
MANUEL M. ARVESU, P.A.
(Name of Firm/Company)
3901 N.W. 79TH AVENUE, SUITE 105
(Address)
MIAMI, FLORIDA 33166
(City/State and Zip Code)
For further information concerning this matter, please call:
MAGGIE SALAS at (305) 593-1260 (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

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, ANNETTE MARTINEZ	, hereby resign as PRESIDENT	
	(Title)	
of_ NARANJA PARK HOLDI		
	(Name of Corporation)	
P05000002277	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
	(Signature of resigning officer/director)	
	(Signature of resigning option appears)	

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