P0500008347

(Requ	estor's Name)		
(Address)			
(Addre	ess)	<u> </u>	
(City/S	State/Zip/Phone #)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: BABY BOSS KIDS	INCORPORATION
	(Name of Corporation)
DOCUMENT NUMBER: P05	000008347
The enclosed Officer/Director Resi	gnation for a Corporation and fee are submitted for filing
Please return all correspondence co	ncerning this matter to the following:
FELIPE SOSA	
(Name of Per	son)
BABY BOSS KIDS INCOPORA	ATED
(Name of Firm/Co	ompany)
10260 NW 3RD STREET	
(Address)	
PEMBROKE PINES, FL 33026	•
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
FELIPE SOSA	at (954) 394-4804
(Name of Person)	at (954) 394-4804 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	le 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, FELIPE SOSA	hereby resign as_	VICE-PRESIDENT (Title)
of_ BABY BOSS KIDS INCO	RPORATED Name of Corporation)	,
P05000008347 (Document Number, if known)	- ,	nder the laws of the State of
FLORIDA	Signature of resigning officer/direct	OF C
		PH 12: 0

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to: