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COVER LETTER

Division of Corporations

SUBJECT: FI Management Inc.
(Name of Corporation)

DOCUMENT NUMBER: POSODOO 7 0410

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

Please return all correspondence concerning this matter to the following:

Robert Pozo
(Name of Person)

FP Management Inc.
(Name of Firm/Company)

16935 Sully Cf
(Address)

Manifeld 33157
(City/State and Zip Code)

For further information concerning this matter, please call:

Pobert Pozo
(Name of Person)

at (305) 804-3442
(Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

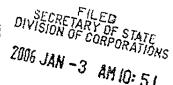
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I,	Robert Pozo	, hereby resign as	Vice President
of_	FP Manager	nent Inc.	······································
	POSOOOO70 410 (Document Number, if known)	_ a corporation organized unde	er the laws of the State of
	Florida	<u>-</u>	

...

sésigning officer/director)

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