P05000075158

(Requestor's Name)
(Addrops)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



200118030282

02/14/08--01024--003 **35.00

OR FEBIL PK 4: 15
SEURETARY OF STALE
TALLAHASSEE, FLORIDA

Office Risign ErinMerphy 2/20/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MAPSA IN VESILENTS JNC (Name of Corporation)
DOCUMENT NUMBER: P05000075158
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PATRICIA GOUEZ (Name of Person)
(Name of Firm/Company)
(Address)
CAPE CORAL FL 33904 (City/State and Zip Code)
For further information concerning this matter, please call:
ROSA PORTEGA at (239) 3335782 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, ALBA	P Come	. hereby resig	n as	PRESIDENT (Title)	
of	MAPSA	INVESIMENTS me of Corporation)	INC.		······,
POS 0 0 00 (Document Nu	·	, a corporation organize	ed under the la	ws of the State of	
FLOR	DA.				
	May	(Signature of resigning officer	/director)	CRETARY OF STALLAHASSEE, FLORE	

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