

PD5 000078746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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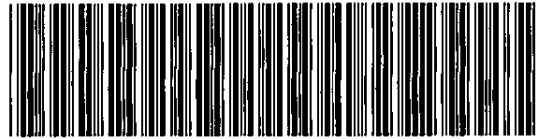
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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O.D. Res. 429

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RINCO CENTRO AMERICANO INC
(Name of Corporation)

DOCUMENT NUMBER: P05000078746

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

Please return all correspondence concerning this matter to the following:

R. MIRIAM SALINAS

(Name of Person)

RINCO CENTRO AMERICANO INC

(Name of Firm/Company)

728 WOOLCO WAY

(Address)

ORLANDO FL 32822-2854

(City/State and Zip Code)

For further information concerning this matter, please call:

R. MIRIAM SALINAS

(Name of Person)

at (407) 432-1467

(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, ASMEL SALINAS, hereby resign as VICE-PRESIDENT
(Title)

of RINCO CENTRO AMERICANO, INC
(Name of Corporation)

P05000078746, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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08 APR 25 PM 12:54
CLERK OF STATE
TALLAHASSEE, FLORIDA

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