

PO5000107104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

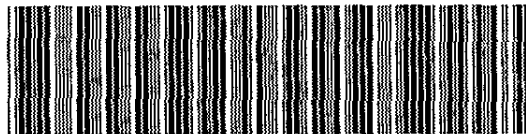
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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OLD Resign.

08/14/06

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D. CONNELL AUG 14 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ATLANTIC SHORELINE REALTY, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000107104

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

Please return all correspondence concerning this matter to the following:

GABRIEL KHOURI
(Name of Person)

ATLANTIC SHORELINE REALTY, INC.
(Name of Firm/Company)

10707 OLD HAMMOCK WAY
(Address)

WELLINGTON FL 33414
(City/State and Zip Code)

For further information concerning this matter, please call:

GABRIEL KHOURI at (561) 452-1166
(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

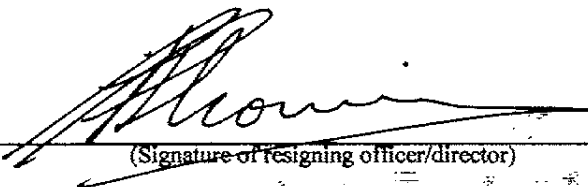
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GABRIEL KHOURI, hereby resign as CEO/PRESIDENT
(Title)

of ATLANTIC SHORELINE REALTY, INC.
(Name of Corporation)

P05000107104, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG -4 AM 11:07

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