

P05000139597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

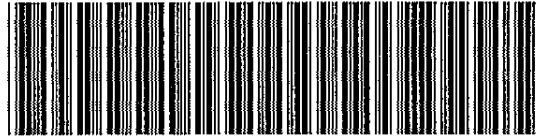
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Resign*

C. Coullotte FEB 02 2006

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SEMOCOR ENTERPRISES, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000139597

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

Please return all correspondence concerning this matter to the following:

HERMINIA FLAQUER

(Name of Person)

SEMOCOR ENTERPRISES, INC.

(Name of Firm/Company)

801 W SR 436, STE 2031

(Address)

ALTAMONTE SPRINGS, FL 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

HERMINIA FLAQUER

(Name of Person)

at ( 407 ) 889-9710

(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

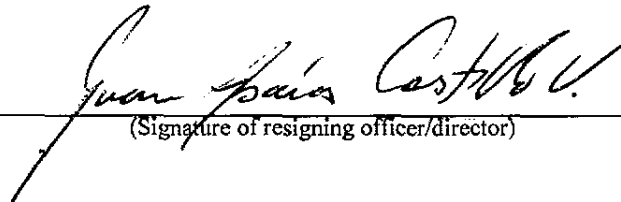
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JUAN I. CASTILLO, hereby resign as TREASURER  
(Title)

of SEMOCOR ENTERPRISES, INC.  
(Name of Corporation)

P05000139597, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning 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

**FILED**  
**2006 JAN 31 AM 9:10**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**