

P05000142398

(Requestor's Name)

(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



300106884373

08/06/07--01037--017 **35.00

FILED
07 AUG -6 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OLD Res
[Signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Skyline Productions & Films, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO 5000142398 / FEI # 203657506 / 10/19/2005

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

Please return all correspondence concerning this matter to the following:

Gilbert Quinones
(Name of Person)

Skyline Productions & Films Inc
(Name of Firm/Company)

PO BOX 617672
(Address)

Orlando, FLA, 32861
(City/State and Zip Code)

For further information concerning this matter, please call:

Gilbert Quinones at (407) 928-5244
(Name of Person) (Area Code & Daytime Telephone Number)

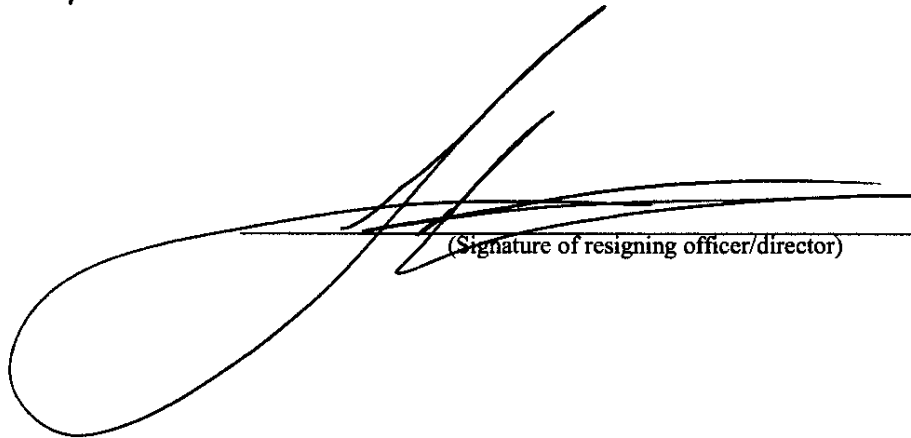
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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, Gilbert Quinones, hereby resign as CEO
(Title)
of Skyline Productions & Films, Inc.
(Name of Corporation)
105000142398, 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

FILED
07 AUG - 6 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314