

PO5000144261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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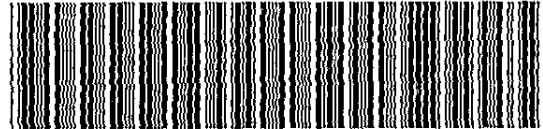
(Business Entity Name)

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TALLAHASSEE FLORIDA

2006 JAN 27 10:00

PO

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISASTER RECOVERY SPECIALISTS INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000144261

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

Please return all correspondence concerning this matter to the following:

David Bevis
(Name of Person)

(Name of Firm/Company)

3403 TARPON WOODS BLVD
(Address)

Palm Harbor FL 34685
(City/State and Zip Code)

For further information concerning this matter, please call:

David Bevis at (813) 525-9525
(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, RENE COSTA-BEVIS, hereby resign as PRESIDENT
(Title)

of DISASTER RECOVERY SPECIALISTS, INC.
(Name of Corporation)

P05000144261, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Rene Costa-Ber
(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

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