## P05000153967

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DIVISION OF COMPORATIONS

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: PORT OF MIAM	I SEAMANS CENTER, INC.			
(Name of Corporation)				
DOCUMENT NUMBER: PO	05000153967			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
C/O DAVID HAUSER, ESQUIRE				
(Name of Person)				
ATTORNEY AT LAW (Name of Firm/Company)				
(Name of Firm/Con	npany)			
1444 KANESCONCOURSE, SUITE 616				
(Address)				
BAY HARBOR ISLANDS, FL 33154				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
DAVID HAUSER, ESQUIRE	at ( 305 ) 864–9934 (Area Code & Daytime Telephone Number)			
(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

Ι,_	RAFIK AYOUB	, hereby resign as	PRESIDENT/DIRECTOR		
		, _	(Title)		
of	PORT OF MIAMI SEAMANS CENTER, INC. (Name of Corporation)	n)	,		
a corporation organized under the laws of the State ofFLORIDA					
and affirm that the corporation has been notified in writing of the resignation.					
		2			

Rafik Ayoub (Signature of resigning officer/director)

Date: June 28, 2006

| PM||2: |

SECRETARY OF STATE DIVISION OF COMPORATIONS

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314