

P05000162924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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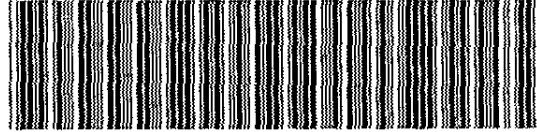
(Business Entity Name)

(Document Number)

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06 JUL 31 PM 3:39  
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AMERICA'S IMMIGRATION VISAS, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P05000162924

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

Please return all correspondence concerning this matter to the following:

ELLIE BOBY LEWIS, JUNIOR

(Name of Person)

AMERICA'S IMMIGRATION VISAS, INC.

(Name of Firm/Company)

17830 N. E. 5TH AVENUE

(Address)

NORTH MIAMI BEACH, FLORIDA 33162

(City/State and Zip Code)

For further information concerning this matter, please call:

MARGARET JEAN LEWIS, PD

(Name of Person)

at ( 305 ) 653-4890

(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**

**FILED**

**06 JUL 31 PM 3:39**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

I, ELLIE BOBY LEWIS, JUNIOR, hereby resign as SECRETARY & TREASURER  
(Title)

of AMERICA'S IMMIGRATION VISAS, INC.  
(Name of Corporation)

P05000162924, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Ellie B. Lewis*  
(Signature of resigning officer/director)



**FILING FEE IS \$35.00**

*Bernadette Millson*

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

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