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COVER LETTER

SUBJECT: Instituto de Entrenamiento Eurest, Inc
(Name of Corporation)

DOCUMENT NUMBER: POSCOCIO 1514

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

Please return all correspondence concerning this matter to the following:

DOC RIVEYOR
(Name of Person)

Instituto de Entrenamiento Eucest Inc.
(Name of Firm/Company)

SAOS N HINES Suite 2096

(Address)

Tampo: Cu 33614
(City/State and Zip Code)

For further information concerning this matter, please call:

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

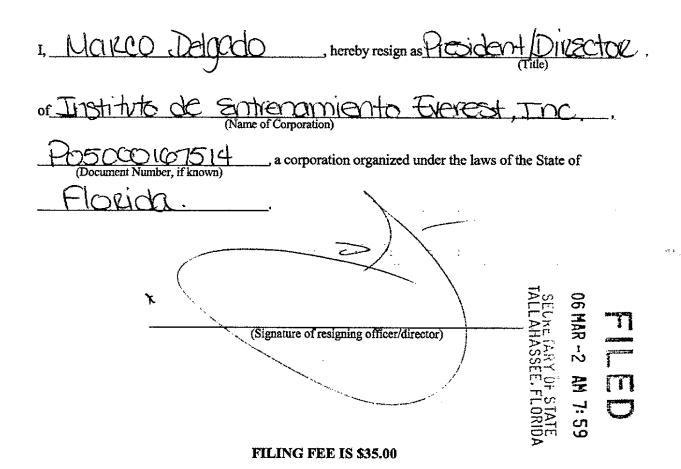
Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



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

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