

PO6000009266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

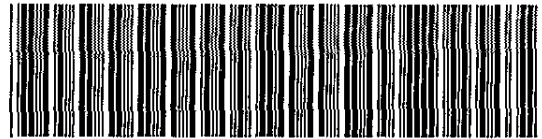
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900069276609

04/03/06--01025--020 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 APR -3 PM 2:32

O/D Resig.

4/7

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RESIGNATION OF DIRECTOR

(Name of Corporation)

DOCUMENT NUMBER: PO6000009266

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

Please return all correspondence concerning this matter to the following:

JOSE J ESTRADA

(Name of Person)

STRADA MANAGEMENT GROUP INC

(Name of Firm/Company)

2381 LAKE DEBRA DR # 1814

(Address)

ORLANDO FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE J ESTRADA

(Name of Person)

at (407) 291-7845

(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

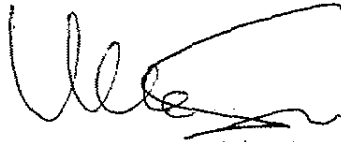
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, WELLINGTON SABINO, hereby resign as DIRECTOR
(Title)

of STRADA MANAGEMENT GROUP INC
(Name of Corporation)

PO6000009266, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
2006 APR -3 PM 2:32

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