

PO6000036436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

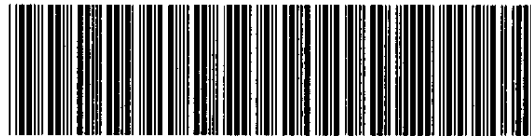
(Business Entity Name)

(Document Number)

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09/21/09--01029--029 **35.00

Mr. Bill Ryz

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 11:10

T Roberts SEP. 22 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ULTRA MEDICAL CENTER , CORP.
(Name of Corporation)

DOCUMENT NUMBER: P06000036436

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

Please return all correspondence concerning this matter to the following:

ORLANDO VENTURA

(Name of Person)

ULTRA MEDICAL CENTER , CORP.

(Name of Firm/Company)

711 NW 23 AVE # 304

(Address)

MIAMI, FL. 33125

(City/State and Zip Code)

For further information concerning this matter, please call:

ORLANDO VENTURA

(Name of Person)

at (305) 644-7407

(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 11:10

I, ORLANDO VENTURA, hereby resign as PRESIDENT
(Title)

of ULTRA MEDICAL CENTER CORP.
(Name of Corporation)

- P06000036436, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Orlando Ventura
(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