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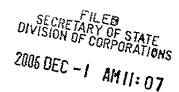
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Division of Corporation	ns	
SUBJECT: MB SIGNS INC		
SUBJECT: MB SIGNS INC. (Name of Corporation)		
DOCUMENT NUMBER:	P06000039581	
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing.	
Please return all corresponden	ce concerning this matter to the following:	
EKATERINA GROUCHITO	OHEVA of Person)	
MB SIGNS INC.	rm/Company)	
(Name of Fi	rm/Company)	
1750 NE 191 ST.#611	tress)	
(Add	dress)	
MIAMI FL, 33179	nd Zip Code)	
(City/State a	nd Zip Code)	
For further information concer	ming this matter, please call:	
EKATERINA GROUCHITC	HEVA at (305) 947-0858 (Area Code & Daytime Telephone Number)	
(Name of Perso	n) (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 850-245-6050	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314	

TO: Amendment Section



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, hereby resign as SECRETARY
(Title)
· · · · · · · · · · · · · · · · · · ·
of Corporation)
a corporation organized under the laws of the State of
· · · · · · · · · · · · · · · · · · ·
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