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TO: Amendment Section Division of Corporations

SUBJECT: MIAMI BEST TROPICAL ENTERPRISE INC			
(Name of Corporation)			
DOCUMENT NUMBER: P060	000082631		
.The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing.		
Please return all correspondence con	ncerning this matter to the following:		
RICHARD VEGA			
(Name of Pers	on)		
MIAMI BEST TROPICAL ENTE	RPRISE INC		
(Name of Firm/Co	mpany)		
1201 N.W. 23RD ST			
(Address)			
MIAMI FL 33142			
(City/State and Zip	Code)		
For further information concerning	this matter, please call:		
RICHARD VEGA	at (305) 633-3505 (Area Code & Daytime Telephone Number)		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made	e 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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I. MARIA E. MACHADO	, hereby resign as_	PRESIDENT/DIRECTOR
-7	,,g	(Title)
of MIAMI BEST TROPICAL ENTERPRIS	E INC	
(Name of Corpora	tion)	,
P06000082631 , a corpo	oration organized un	der the laws of the State of
(Document Number, if known)		
FLORIDA		

(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