

P06000082824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

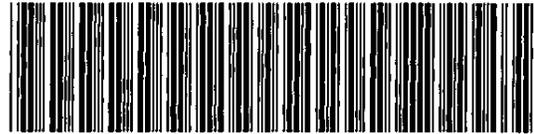
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ILLIA ENTERPRISES, INC

(Name of Corporation)

**DOCUMENT NUMBER:** P06000082824

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

Please return all correspondence concerning this matter to the following:

**JOSEPH CARR**

(Name of Person)

**ILLIA ENTERPRISES, INC.**

(Name of Firm/Company)

**1497 SW 25TH WAY**

(Address)

**DEERFIELD BEACH, FL 33142**

(City/State and Zip Code)

For further information concerning this matter, please call:

**EKRAM TAHERIASR**

(Name of Person)

at ( 484 ) 994 6940

(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:**

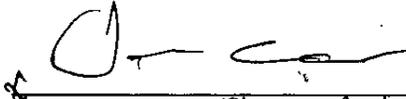
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JOSEPH CARR, hereby resign as PRESIDENT  
(Title)

of ILLIA ENTERPRISES, INC.  
(Name of Corporation)

P060000 82 824, a corporation organized under 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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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