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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: VICTORIA'S CAFE & RESTAURANT, INC. (Name of Corporation)
DOC	UMENT NUMBER: P06000118307
The er	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
MAF	RIA SIMIELE
	(Name of Person)
VICT	TORIA'S CAFE & RESTAURANT, INC.
	(Name of Firm/Company)
1663	31 WATER'S EDGE DRIVE
	(Address)
WES	STON FL 33326
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
MAR	IA SIMIELE at (954) 658-0837 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Cliftor 2661 I	Mailing Address: dment Section on of Corporations n Building Executive Center Circle passee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. HELEN SANTOS	, hereby resign as_	VICE PRESIDENT			
	, ,	(Title)			
of VICTORIA'S CAFE & RESTAURANT, INC.					
(Nar	ne of Corporation)				
(Document Number, if known)	_, a corporation organized under the laws of the State of				
FLORIDA .					

_

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