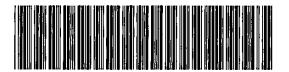
## P06000121435

(Re	equestor's Name)		
(Ac	ldress)		
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(Ci	ty/State/Zip/Phone	e #)	
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## COVER LETTER

MAUREEN'S INVESTMENTS, INC. (Name of Corporation) P06000121435 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PETER WAHBA (Name of Person) ITS CENTER, INC (Name of Firm/Company) 15145 SHAW RD (Address) **TAMPA, FL 33625** (City/State and Zip Code) For further information concerning this matter, please call: SAMIA WAHBA (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address:
Amendment Section
Division of Corporations
Clifton Building **Mailing Address:** Amendment Section Division of Corporations Post Office Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	CR / DIRECTOR RESIGNATION	ATION OF HOW IS PH 2:40  VICE-PRESIDENT
RAMY NASSIEF	, hereby resign as_	VICE-PRESIDENT  (Title)
of MAUREEN'S INVESTMEN	NTS, INC.  Name of Corporation)	,
P06000121435 (Document Number, if known)	, a corporation organized un	der the laws of the State of
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