P06000141723

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	y/State/Zip/Phon	e #)
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(Bu	siness Entity Na	me)
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2007 JAN 22 PM 4: 34 SECRETARY OF STATE ALLAHASSEE, FINDER

DB Resign-

C. Coulliette JAN 2 4 2007

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT:B&E MEDICAL, CORP.
	(Name of Corporation)
DOC	UMENT NUMBER: P06000141723
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
JAD	DREY BELLON
	(Name of Person)
B&E	MEDICAL, CORP.
	(Name of Firm/Company)
260	7 NW 20 ST
	(Address)
MIA	MI, FL 33142
	(City/State and Zip Code)
For fu	urther information concerning this matter, please call:
JAD	DREY BELLON at (786) 333-1502 (Area Code & Daytime Telephone Number)
4.1****	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section ion of Corporations on Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, CARLOS MOREI	, hereby resign as VICE PRESIDENT
-7	(Title)
of B&E MEDICAL, CORP.	
	Name of Corporation)
P06000141723 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	·
	SECRETARY (Signature of resigning officer/director) FIL (Signature of resigning officer/director)
	(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