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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TRINITY SENIOR CARE, INC
(Name of Corporation)

DOCUMENT NUMBER: P06000147177

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

Please return all correspondence concerning this matter to the following:

ELIZABETH VELOZO
(Name of Person)

TRINITY SENIOR CARE, INC
(Name of Firm/Company)

7791 N.W. 46 STREET SUITE 309
(Address)

DORAL, FLORIDA 33166
(City/State and Zip Code)

For further information concerning this matter, please call:

ELIZABETH VELOZO at (305) 436-8883
(Name of Person) (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**

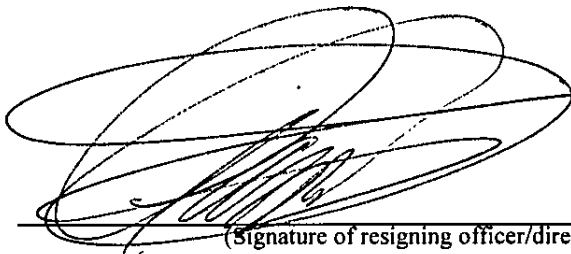
FILED
07 MAY 29 AM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, RAZEN SANCHEZ, hereby resign as VICE-PRESIDENT
(Title)

of TRINITY SENIOR CARE, INC.
(Name of Corporation)

P06000147177, 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