PO700004377

(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
' (Business Entity Name)		
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SECRETARY OF STATE
TALLAHASSEE, FINANCE

COVER LETTER

	nent Section of Corporations	
SUBJECT: C	AMERA SHOP &	ELECTRONICS, INC.
		(Name of Corporation)
DOCUMENT	NUMBER: P07	7000004377
The enclosed O	fficer/Director Res	ignation for a Corporation and fee are submitted for filing.
Please return al	l correspondence co	oncerning this matter to the following:
MIGUEL A G	ONZALEZ	
-	. (Name of Per	rson)
CAMERA SH	IOP & ELECTRO	NICS, INC.
	(Name of Firm/C	ompany)
7810 WEST	IRLO BRONSON	HWY
	(Address)
KISSIMMEE,	FL 34747	
	(City/State and Z	ip Code)
For further info	rmation concerning	g this matter, please call:
MIGUEL A G	ONZALEZ	at (407) 9470525 (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a cl	neck for \$35.00 ma	de payable to the Florida Department of State.
Street Address Amendment Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	ction porations S Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, ERROL M. LAZO	, hereby resign as Director
-7	(Title)
of CAMERA SHOP & ELECTRO	ONICS, INC.
(Name	of Corporation)
P0700004377 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	_,
	tour f
	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