

PD70000004691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

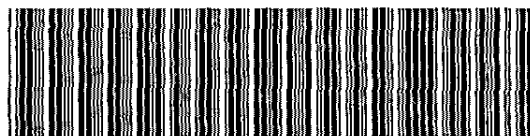
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LILAFE CONSTRUCTION AND MANAGEMENT, INC
(Name of Corporation)

DOCUMENT NUMBER: P07000004691

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

LAZARO SANTOVENIA-OJEDA
(Name of Person)

O & D CONSTRUCTION CORPORATION
(Name of Firm/Company)

P O BOX 6910
(Address)

WEST PALM BEACH, FL 33405
(City/State and Zip Code)

For further information concerning this matter, please call:

LAZARO SANTOVENIA-OJEDA at (561) 722-6213
(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

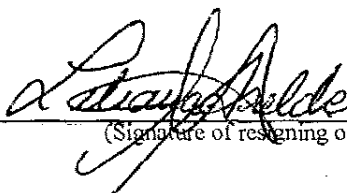
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LILIANA E. ASALDE WONG, hereby resign as VICE-PRESIDENT
(Title)

of LILAFE CONSTRUCTION AND MANAGEMENT, INC.
(Name of Corporation)

P07000004691, 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

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DIVISION OF CORPORATIONS
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