

P07000046731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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*Resignation
of officer*

04/04/08--01010--010 **35.00

FILED
2008 APR -4 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*AR
4/8/08*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EXPORTS IMPORTS LA FRONTERA INC
(Name of Corporation)

DOCUMENT NUMBER: P0700046731

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

Please return all correspondence concerning this matter to the following:

OLGA CRUZ

(Name of Person)

(Name of Firm/Company)

16120 64TH PLACE N

(Address)

LOXAHATCHEE FL 33470

(City/State and Zip Code)

For further information concerning this matter, please call:

OLGA L CRUZ

(Name of Person)

at (561) 502-3619

(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

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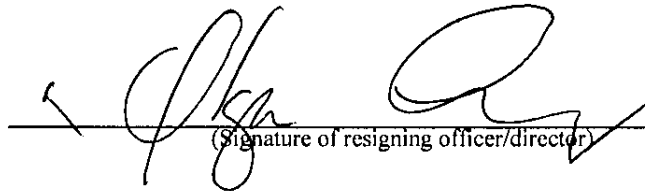
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, OLGA L CRUZ, hereby resign as OFFICER/DIRECTOR
(Title)

of EXPORTS IMPORTS LA FRONTERA INC
(Name of Corporation)

P07000046731, 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