

P07000126771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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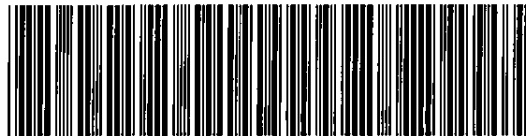
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DERMA GOLD DISTRIBUTORS, INC.
(Name of Corporation)

DOCUMENT NUMBER: P07000126771

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

Please return all correspondence concerning this matter to the following:

MABEL RUIZ HERNANDEZ

(Name of Person)

DERMA GOLD DISTRIBUTORS, INC.

(Name of Firm/Company)

7737 NORTH UNIVERSITY DRIVE, #107

(Address)

TAMARAC, FLORIDA 33321

(City/State and Zip Code)

For further information concerning this matter, please call:

LISA METELLUS-HOOD, ESQUIRE at (954) 321-9979
(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

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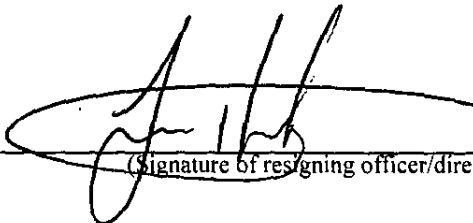
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JOANNA HERNANDEZ, hereby resign as SECRETARY/TREASURER
(Title)

of DERMA GOLD DISTRIBUTORS, INC.
(Name of Corporation)

P07000126771, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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