P08000022639

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
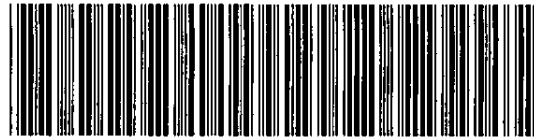(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.COULLIETTE

OCT 23 2008

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAXIM'S EVENTS, INC.
_____
(Name of Corporation)

DOCUMENT NUMBER: P08000022639
_____

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

Please return all correspondence concerning this matter to the following:

ELIA C. QUINTANA
_____
(Name of Person)

LAW OFFICE OF STEWART A MERKIN PA
_____
(Name of Firm/Company)

444 BRICKELL AVE., STE. 300
_____
(Address)

MIAMI, FL 33131
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

ELIA C QUINTANA   at (305) 357-5556
_____   _____
(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: **Mailing Address:**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
Clifton Building   Post Office Box 6327
2661 Executive Center Circle   Tallahassee, FL 32314
Tallahassee, FL 32301
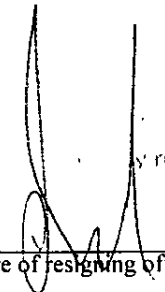
CR2E044(08/05)

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

I, ANA M. VATAVU _____, hereby resign as PSTD _____

(Title)

of MAXIM'S EVENTS, INC. _____,

(Name of Corporation)

P08000022639 _____, 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