

P09000029846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

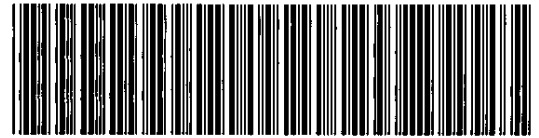
(Business Entity Name)

(Document Number)

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08/23/10--01031--005 \*\*85.00

*Off / Liu Resign*

FILED  
10 AUG 23 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\* Roberts AUG 25 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KIDZ VILLAGE MONTESSORI SCHOOL DAY CARE  
(Name of Corporation)

**DOCUMENT NUMBER:** PO9 000029846

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

Please return all correspondence concerning this matter to the following:

SANDRA JOHNSTON  
(Name of Person)

KIDZ VILLAGE  
(Name of Firm/Company)

4365 N UNIVERSITY DRIVE  
(Address)

SUNRISE FL 33351  
(City/State and Zip Code)

For further information concerning this matter, please call:

SANDRA JOHNSTON at ( 954 ) 534 0833  
(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

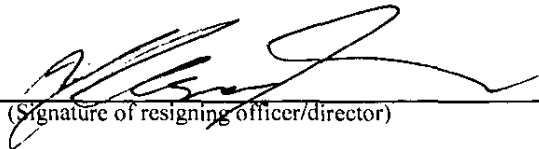
OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION

FILED  
10 AUG 23 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, HASSAN ALGHANNAH, hereby resign as VICE PRESIDENT  
(Title)

of KIDZ VILLAGE MONTESSORI SCHOOL & DAY CARE CENTER, INC.  
(Name of Corporation)

PO9000029846, 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