

PD9 000 052907

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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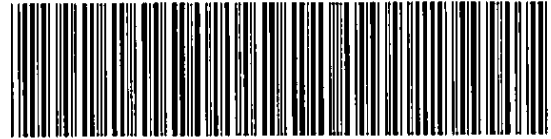
(Business Entity Name)

(Document Number)

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U.S. DEPARTMENT OF JUSTICE

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U.S. DISTRICT COURT  
DISTRICT OF COLUMBIA

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISPOSITIVE SOLUTIONS, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000052907

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

Please return all correspondence concerning this matter to the following:

PATRICK BURNS  
(Name of Person)

DISPOSITIVE SOLUTIONS, INC.  
(Name of Firm/Company)

15786 Woodgate Ct.  
(Address)

SUNRISE, FL. 33326  
(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICK BURNS at ( 954 ) 376-2378  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, MARY ANN BURNS, hereby resign as TREASURER / VICE PRESIDENT  
(Title)

of DISPOSITIVE SOLUTIONS, INC  
(Name of Corporation)

PD9000052907, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Mary Ann Burns  
(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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