## P0900055159

(Requestor's Name)	
(Address)	
(	
(Address)	
(City/State/Tin/Dhane #)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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02/26/10--01022--016 \*\*35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

AFPROVE.



## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: SOCIAL EVENT E	(Name of Corporation)
DOCUMENT NUMBER: PO	9000055159
The enclosed Officer/Director Re	signation for a Corporation and fee are submitted for filing
Please return all correspondence of	concerning this matter to the following:
FIDEL A. SANTANA	
(Name of Po	erson)
SOCIAL EVENT ENTERTAIN	IMENT NETWORK,INC
(Name of Firm/	Company)
3571 SW 117 AVE # 201	
(Address	s)
MIAMI, FL. 33175	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
FIDEL A. SANTANA	at ( 305 ) 485-4453
(Name of Person)	at ( 305 ) 485-4453 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	nde 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

I FIDEL A. SANTANA	, hereby resign as VICE PRESIDENT
**	(Title)
of SOCIAL EVENT ENTERTAINMENT NI	· · · · · · · · · · · · · · · · · · ·
P09000055159 , a corpo	oration organized under the laws of the State of
FLORIDA .	
F. 10.	. 2
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

10 FEB 26 PH 3: 32 SECRETARY OF STATE