P32818

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

Office Use Only



500102488185

05/17/07--01015--023 **35.00

the / Dei Resign

O7 MAY 17 PM 2: 0
SCOKE LARY OF STATI

COVER LETTER

SUBJECT: Sports/Leisure, Inc.				
(Name of Cor	poration)			•
DOCUMENT NUMBER: P32818				
The enclosed Officer/Director Resignation for a Corporat	tion and fee are	submitted for filing.		•
Please return all correspondence concerning this matter to	o the following:			
Milton Barbarosh				
(Name of Person)	 -	•	- ;	* .
(Name of Firm/Company)	 , ,	t in the second		·
21218 St. Andrews Blvd, #417				
(Address)	·*.	•		
Boca Raton, FL 33433				
(City/State and Zip Code)	 <u>-</u>			
For further information concerning this matter, please cal	1:			
Linda Coviello at (704 (Area C	748-2601 ode & Daytime 1	Telephone Number)		··
Enclosed is a check for \$35.00 made payable to the Florid	da Department o	of State.		
Street Address: Mailing Address: Amendment Section Amendment Section	_			

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

07 MAY 17 PM 2: 01

SEURETARY OF STATE
ALLAHASSEE, FLORIDA

I, Milton H. Barbarosh	hereby resign as Director		_
	(Title)		
of Sports/Leisure, Inc.			
	me of Corporation)	- 	· · · ·
P32 817 (Document Number, if known)	a corporation organized under the laws of the State of		₽♥ ≐
Florida			
		* %	•

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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