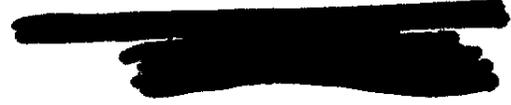


P93000032017

Carl J. Mecke, P.A.
5740 Hollywood Boulevard
Suite 300
Hollywood, Florida 33021

City/State/Zip

Phone #



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 29, 1998

CARL J. MECKE, P.A.
SUITE 300
5740 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33021

SUBJECT: MAGIC MOMENTS PHOTOGRAPHY & MODELING, INC.
Ref. Number: P93000032017

WE HAVE RECEIVED YOUR DIRECTOR RESIGNATION DOCUMENT FOR
MAGIC MOMENTS PHOTOGRAPHY & MODELING, INC. HOWEVER, NO
CHECK WAS ENCLOSED. PLEASE SEND A CHECK OR MONEY ORDER
PAYABLE TO THE DEPARTMENT FOR \$35.00 ALONG WITH YOUR
DOCUMENT AND A COPY OF THIS LETTER.

If you have any questions concerning the filing of your document, please call
(850) 487-6957.

Doug Spittler
Document Specialist

Letter Number: 698A00053014

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DIVISION OF CORPORATIONS

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Florida Department of State, Sandra B. Mortham, Secretary of State

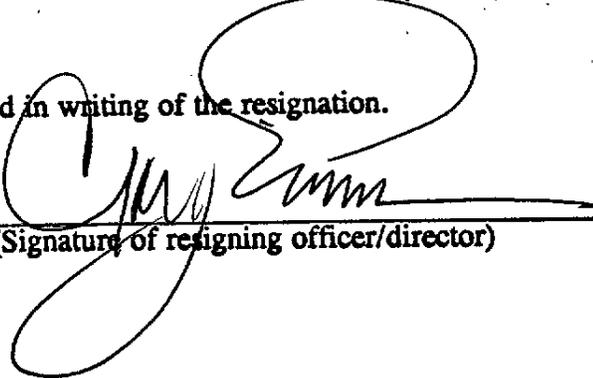
OFFICER / DIRECTOR RESIGNATION

I, CRAIG EMERSON, hereby resign as DIRECTOR
(Title)

of MAGIC MOMENTS PHOTOGRAPHY + MODELING, INC.
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA.

That the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314