# P94000026009

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SECRETARY OF STATE

officer Resignation

# TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SKY'S Flight Scruice, INC.  Name of Corporation)  DOCUMENT NUMBER: P9400026009
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
John toindexter (Name of Person)
(Name of Person)
SKYWAYS INTERNATIONAL (Name of Firm/Company)
(Name of Firm/Company)
1100 Lee Wagener Blud (#205)
(Address)
Fort Auderdale, FL33315 (City/State and Zip Code)
For further information concerning this matter, please call:
Hernau ARIAS at (305) 442-6038 (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

TO: Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 9, 2004

JOHN POINDEXTER SKYWAYS INTERNATIONAL 1100 LEE WAGENER BLVD., #205 FORT LAUDERDALE, FL 33315

SUBJECT: SKY'S FLIGHT SERVICE, INC

Ref. Number: P94000026009

Upon receipt of your letter and/or check(s) totaling \$35.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown Document Specialist

Letter Number: 404A00043657



# FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# O4 JUL 16 AH 8: 04 SECRETARY OF STATE TALLAHASSEE, FLORIDA

## OFFICER / DIRECTOR RESIGNATION

I, San Rowcextee, hereby resign as President			
of Sky's Flight Schoice, INC			
(Name of Corporation)			
a corporation organized under the laws of the State of FCOUDA			
and affirm that the corporation has been notified in writing of the resignation.			
(Signature of resigning officer/director)			

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314