P95000000376

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)	<u>_</u>		
(Cit	iy/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	ertified Copies Certificates of Status			
Special Instructions to Filing Officer:				
		Ì		

Office Use Only



300027283813

01/21/04--01023--016 **35.00

PILED

04 JAN 21 PH 4: 15

PALLAHASSEE, FLORINA

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: KitchEN Cabinet Specialists Inc. (Name of Corporation)			
DOCUMENT NUMBER:			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Please return all correspondence concerning this matter to the following:			
Chad Acres (Name of Person)			
(Name of Firm/Company)			
637 SE contral Parkway Business conter #305			
Stuart Florida (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at () (Area Code & Daytime Telephone Number)			
Enclosed is a check for \$35.00 made payable to the Florida Department of State.			
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399			

FILED

04 JAN 21 PH 4: 15

TALLAHASSEF FIRMS

CR2E044(11/02)

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Chao Acres hereby resign as P	RESIDENT (Title)
of	KitchEN CADINET Specialists (Name of Corporation)	INC.
	(Document Number, if known) a corporation organized under the law	vs of the State of
	(Signature of resigning officer/director)	O4 JAN 21 PM 4: 15 TALLAHASSEE, FLORI
	FILING FEE IS \$35.00	F. 15

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

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