

P96000007983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

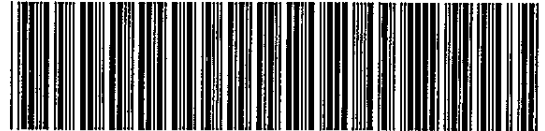
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900058440239

Resignation

06/06/05

08/11/05--01044--006 *\$35.00

FILED

05 AUG 11 PM 4:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
8/15/05

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gables C.T. Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P96000007983 (5)

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan Torres
(Name of Person)

(Name of Firm/Company)

7406 SW 48 St
(Address)

Miami FL 33155
(City/State and Zip Code)

For further information concerning this matter, please call:

Odalis Torres at (305) 261-1242
(Name of Person) (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

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

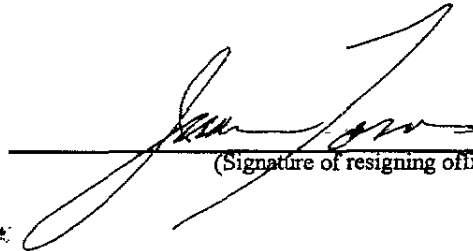
FILED
05 AUG 11 PM 4:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Juan Torres, hereby resign as Secretary
(Title)

of Gables C.T. Services, Inc.
(Name of Corporation)

P96000007983 (5), a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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