P94000054891

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	4 TV Friday kalish maraba
(Cit	ty/State/Zip/Phone	(#)
	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STAIL

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COVER LETTER

Division of Corporations
SUBJECT: 7th Street Building, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P96000054891
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Anthony Davide
(Name of Person)
7th Street Building, Inc.
(Name of Firm/Company)
7333 Coral Way
(Address)
Miami, Florida 33155
(City/State and Zip Code)
For further information concerning this matter, please call:
Anthony Davide at (305) 558-3800 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Salvatore J. DAvide	, hereby resign as_	President/Sect./Direc./Treas	
	,,,,	. (Title)	
7th Street Building, Inc.			
(Na	me of Corporation)	,	
P96-0000-54891	, a corporation organized under the laws of the State of		
(Document Number, if known)	, a corporation organized under the laws of the state of		
Florida		•	
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	(Signature of resigning officer/direct	APR 12	
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		J.	

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