

T96000077805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

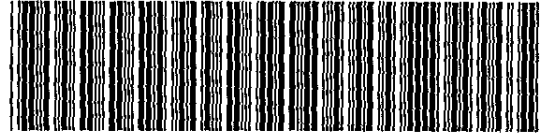
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

6/28/03
o/a les.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MACARENA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P96000077805

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

CARLOS GALAN
(Name of Person)

MACARENA, INC.
(Name of Firm/Company)

1334 WASHINGTON AVENUE SUITE #301
(Address)

MIAMI BEACH, FLORIDA 33139
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS GALAN at (305) 531-3440
(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

03 MAY 21 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, CESAR RUIZ hereby resign as PRESIDENT
(Title)

of MACARENA, INC.
(Name of Corporation)

P96000077805 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