

P96000088168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

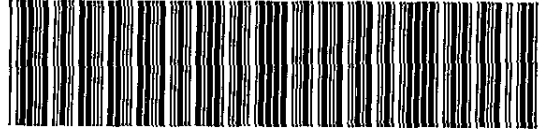
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200024173822

10/31/03--01036--008 **35.00

FILED
03 OCT 31 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

©

0/0 Res
006
11-8

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SPORTSMED, INC.

(Name of Corporation)

DOCUMENT NUMBER: P96000088168

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

Please return all correspondence concerning this matter to the following:

ALAN H. PASTOR, CPA

(Name of Person)

PASTOR, BOLDEN & INDICTOR, P.C.

(Name of Firm/Company)

7700 CONGRESS AVE. - STE 3107

(Address)

BOCA RATON, FL 33484

(City/State and Zip Code)

For further information concerning this matter, please call:

ALAN H. PASTOR, CPA

(Name of Person)

at (561) 995-1935

(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**

I, HORTENSE C. MCDEAVITT, hereby resign as VICE-PRES. & SECRETARY
(Title)

of SPORTSMED, INC.
(Name of Corporation)

P96000088168
(Document Number, if known), a corporation organized under the laws of the State of

FLORIDA


(Signature of resigning officer/director)

FILED
03 OCT 31 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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