

P97000024354

(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



400102690054

05/21/07--01025--025 **35.00

APPROVED
AND
FILED

07 MAY 21 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Off Register

C. Goulette MAY 24 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMEXPO, INC.
(Name of Corporation)

DOCUMENT NUMBER: P97000024354

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

JW Clarke, Registered Agent
(Name of Person)

James W. Clarke, CPA, P.A.
(Name of Firm/Company)

213 Southern Blvd, Ste 200
(Address)

West Palm Beach, Florida 33405
(City/State and Zip Code)

For further information concerning this matter, please call:

James W. Clarke, Registered Agent at (561) 655-2277
(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

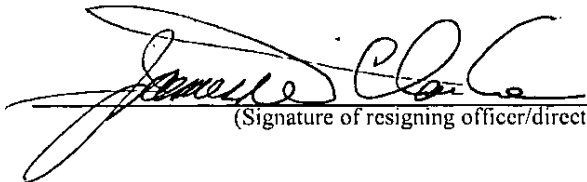
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JAMES W. CLARKE, hereby resign as DIRECTOR
(Title)

of AMEXPO, INC.
(Name of Corporation)

P97000024354, 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

07 MAY 21 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED