P97000065222

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Cassial lastrustions to Filips Officer
Special Instructions to Filing Officer:





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11/14/05--01051--002 **35.00



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TO: Amendment Section Division of Corporations

SUBJECT: CENTRAL FLORIDA CARPET RESTORATION, INC (Name of Corporation)
DOCUMENT NUMBER: p97000065222
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Wayne Wilt, CFP, EA (Name of Person)
,
Brooks & Wilt
(Name of Firm/Company)
450 N Park Rd 710 (Address)
Hollywood FL 33021
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

COVER LETTER

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, _	Megan Baer		, hereby resign a	Direc s <u>Vice</u>	tor, <u>President</u> (Title)	& Sec	<u>cr</u> etary
of_	Central Florida (Na	Carpet :		Inc.			_,
	P97000065222 (Document Number, if known)	, a corp	poration organized	under the l	laws of the Stat	te of	
	Florida	<u> </u>				8	
	(luejaj	(Signature o	of resigning officer/dir	ector)	AHASSEE. FLOR	NOV I 4 PM 4: I	FILED

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