## P9800036927

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA 2008 DEC 19 AM 10: 04

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: FOOD ZONE	119, INC.
	(Name of Corporation)
DOCUMENT NUMBER:_	P98000026929
The enclosed Officer/Directo	r Resignation for a Corporation and fee are submitted for filing
Please return all corresponde	nce concerning this matter to the following:
SHABEER SHEKHA	
(Name	of Person)
FOOD ZONE 119 INC.,	
(Name of F	irm/Company)
9585 SW 160TH STREE	r
(Ad	dress)
MIAMI, FL-33157	
(City/State	and Zip Code)
For further information conce	erning this matter, please call:
SHABEER SHEKHA	at ( 954 ) 554-2909 (Area Code & Daytime Telephone Number)
(Name of Pers	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.0	0 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

NOOR MAHAMMAD	, hereby resign as DIRECTOR		
**	, notoby rosigir as	(Title)	
of FOOD ZONE 119, INC.,			
(Name	e of Corporation)		
P98000026929 (Document Number, if known)	, a corporation organized under the laws	s of the State of	
(Document Number, it known)			
FLORIDA	•		
	(Signature of resigning officer/director)	2000 DEC 19 AM 10: 04 SECRETARY OF STATE TALLAHASSEE. FLORID	F

## 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