P98000034291

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	9
PICK-UP	MAIT	MAIL
(Ви	siness Entity Name)
(Do	cument Number)	
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TRANSMITTAL LETTER

Waterfront Book	rourants inc. of Clarmont
SUBJECT: Waterfront Rest	(Name of Corporation)
,	•
DOCUMENT NUMBER:	P98000034291
The enclosed Officer/Director	Resignation for a Corporation and fee are submitted for filing
Please return all correspondence	e concerning this matter to the following:
Carl Christian Thier	
(Name of	Person)
Waterfront Restaurants, Inc	c. of Clermont
(Name of Fire	n/Company)
545-7 Delaney Avenue	
(Addi	ess)
Orlando FL 32801	
(City/State an	d Zip Code)
For further information concerr	ning this matter, please call:
Carl Christian Thier	at (407) 245 8360 (Area Code & Daytime Telephone Number)
(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:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	409 E. Gaines Street
Tallahassee, FL 32314	Tallahassee, FL 32399

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Wolfgand Dueren	, hereby resign as Director	
·,	(Title)	
of Waterfront Restaurants, Inc.	of Clermont	
(Nam	e of Corporation)	
(Document Number, if known)	, a corporation organized under the laws of the State	of
Florida	<u>_</u> .	
	Ti.	
 4	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