

P98000064485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

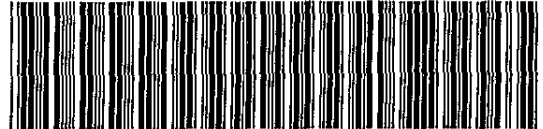
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600021858116

08/01/03--01028--001 \*\*35.00

FILED

03 AUG -1 PM 3:31

RECEIVED  
FILING OFFICE  
TALLAHASSEE, FLORIDA

Off. Receipt  
T. Lewis 8/5/03

7/30/03

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Moscariello Design, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P98000004485

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

Please return all correspondence concerning this matter to the following:

Steven Pessel  
(Name of Person)

MDIRACING, INC.  
(Name of Firm/Company)

10351 Southern Blvd  
(Address)

Royal Palm Beach, FL 33411  
(City/State and Zip Code)

For further information concerning this matter, please call:

Steven Pessel at ( 561 ) 798-2433  
(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:**  
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

7/30/03

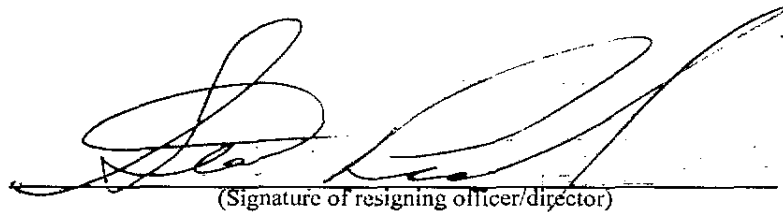
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Steven Pessel, hereby resign as Secr Vice President  
(Title)

of Moscariello Design, Inc.  
(Name of Corporation)

P98000064485 a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

FILED  
03 AUG -1 PM 3:31  
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