P98000092425

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
	<u> </u>		

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Of / Did Resup



COVER LETTER

Division of Corporations
SUBJECT: ENSEW FMPORT & EXPORT CORPORATION (Name of Corporation) DOCUMENT NUMBER: P980000 92425
DOCUMENT NUMBER: <u>1980000 92425</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
KIRIL LRISTENSEW (Name of Person)
(Name of Firm/Company)
9900 5574 WAY (Address)
(Address)
PINELLAS PARIL FL 33782 (City/State and Zip Code)
For further information concerning this matter, please call:
KIRIL KRISTENSEN at (727) 768-6762 (Name of Person) at (727) 768-6762 (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

TO:

Amendment Section

FO	DIRECTOR RESIGNAT R A CORPORATION	11 APR -4 AM 8:52
I, KRIL KRISTENSEN	, hereby resign as	Vice President Director
of ENSEN FMPORT (Name	E EXPORT CORP. Of Corporation)	
P980000 924 25 (Document Number, if known)	_, a corporation organized under	the laws of the State of
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