

P99000052093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

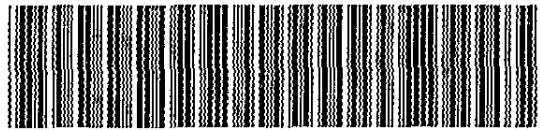
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

old Resignation
Jm
7/14/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S. T. Masters, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

William E. Gottfried, Esquire
(Name of Person)

William E. Gottfried, P. A.
(Name of Firm/Company)

1435 Gulf to Bay Blvd., Suite C
(Address)

Clearwater, Florida 33755
(City/State and Zip Code)

For further information concerning this matter, please call:

William E. Gottfried at (727) 462-5592
(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

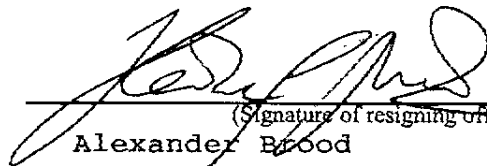
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALEXANDER BROOD, hereby resign as Director
(Title)

of S. T. Masters, Inc.
(Name of Corporation)

799000052093, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)
Alexander Brood

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TALLHASSEE, 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