

P99000062765

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CARE TOUCH MEDICAL EQUIPMENT INC.

(Name of Corporation)

DOCUMENT NUMBER: P99000062765

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

Please return all correspondence concerning this matter to the following:

SHARON THIBAUT

(Name of Person)

(Name of Firm/Company)

5740 HOLLYWOOD BLVD STE 300

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

SHARON THIBAUT

at (954) 967-8200

(Name of Person)

(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


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, VIKAS KAPUR, hereby resign as VICE PRESIDENT
(Title)

of CARE TOUCH MEDICAL EQUIPMENT INC.
(Name of Corporation)

P99000062765, a corporation organized under the laws of the State of
(Document Number, if known)

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

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10 FEB 26 PM 2:50
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