

P9900007012



**M.A. FINANCIAL GROUP**

INSURANCE AND FINANCIAL SERVICES  
"YOUR ONE STOP SHOP" - EVERYTHING YOU NEED AT YOUR FINGERTIPS

4349 N.W. 36TH STREET  
MIAMI, FLORIDA 33166

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FACSIMILE (305) 888-3192  
E-MAIL ADDRESS  
onestopshop@mafinancialgroup.com

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TOLL FREE FAX (866) 866-3192  
WEB ADDRESS  
www.mafinancialgroup.com

April 13<sup>th</sup>. 2001

ATT: "To Whom it May Concern"

Florida Department of Revenue  
Division of Corporations  
5050 West Tennessee Street  
Tallahassee, FL 32399-0100

600004421016--3  
-06/14/01--01121--012  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: Share Resignation

Gentlemen:

Please be advised that, effective immediately, I, Max A. Adams, Esq., resign all my shares in M.A.P.O. Inc., in favor of my partner Mr. Philippe Olloqui.

Should you have any questions or need additional information regarding this matter, please feel free to contact me at (305) 887-9069

Thank you for your courtesy and prompt attention to this matter and in expectance of your diligent action regarding same, I remain,  
Cordially,

Max A. Adams  
President & CEO

CC: Collections Section  
Philippe Olloqui

OLD Res.

S. PAYNE JUN 15 2001

FILED  
01 JUN 14 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 10, 2001

MAX A. ADAMS  
M.A. FINANCIAL GROUP  
4349 N.W. 36TH STREET  
MIAMI, FL 33166

SUBJECT: M.A.P.O., INC  
Ref. Number: P99000070127

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

To file a resignation as an officer or director with this office, the enclosed form should be completed and returned with a filing fee of \$35 per person resigning.

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis  
Corporate Specialist Supervisor

Letter Number: 701A00028358


**OFFICER / DIRECTOR RESIGNATION**

FILED  
01 JUN 14 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Max A Adams, hereby resign as Vice-President/co-owner  
(Title) officer  
of M. A. P. O., Inc.  
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**