

P99000050869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

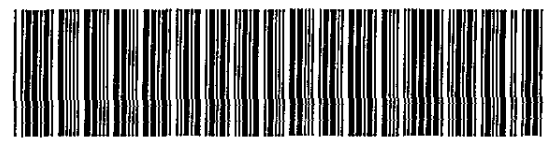
(Business Entity Name)

(Document Number)

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03 JUN -2 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Off Resign  
T. Lewis 6/5/03

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OCHOA SIDING INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000050869  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

CLAXTON OCHOA  
\_\_\_\_\_  
(Name of Person)

OCHOA SIDING INC  
\_\_\_\_\_  
(Name of Firm/Company)

1963 LUCKY TRAIL  
\_\_\_\_\_  
(Address)

LONGWOOD, FL 32750  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

CLAXTON OCHOA at ( 407 ) 339-0200  
\_\_\_\_\_  
(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**

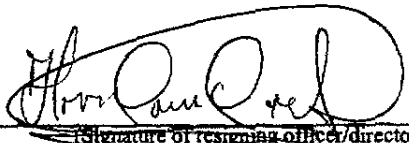
**FILED**  
03 JUN -2 PM 4: 12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, HUGO OCHOA, hereby resign as VICE PRESIDENT  
(Title)

of OCHOA SIDING INC,  
(Name of Corporation)

P99000050869, 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