

P99000070607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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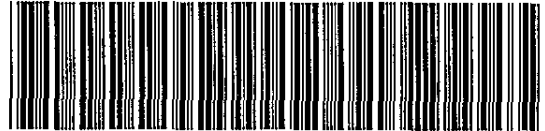
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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after 7-3-03  
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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** EASY MAXX, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P99000070607

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

Please return all correspondence concerning this matter to the following:

PAUL CAMP LANE

(Name of Person)

LANE & ASSOCIATES, P.A.

(Name of Firm/Company)

5301 CONROY ROAD, SUITE 140

(Address)

ORLANDO, FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL CAMP LANE, ATTORNEY

(Name of Person)

at ( 407 ) 316-0343

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, PAUL CAMP LANE, hereby resign as DIRECTOR  
(Title)

of EASY MAXX, INC.  
(Name of Corporation)

P99000070607, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, 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