## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021310

Entity Name: XTREME ACCESSORIES, LLC

15751 SW 41ST STREET

**DAVIE, FL 33331** 

Address:

City-St-Zip:

FILED Mar 23, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 15751 SW 41ST STREET 15751 SW 41ST STREET 100 100 DAVIE, FL 33332 **DAVIE, FL 33331 Current Mailing Address: New Mailing Address:** 15751 SW 41ST STREET **DAVIE, FL 33331** FEI Number: 65-1157573 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LUBIN, SETH D ESQ. 15751 SW 41ST STREET 100 DAVIE, FL 33331 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BART, GARY Name: Name: 15751 SW 41ST STREET Address: Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition CAVE, TIM Name: Name: Address: 15751 SW 41ST STREET Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCNULTY, SEAN Name: Name: Address: 15751 SW 41ST STREET Address: City-St-Zip: **DAVIE, FL 33331** City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: CONSTANTINE, DEAN Name: 15751 SW 41ST STREET Address: Address: City-St-Zip: DAVIE, FL 33331 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition LUBIN, SETH Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: SETH LUBIN MGRM 03/23/2005