2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Mar 16, 2006 8:00 am **Secretary of State DOCUMENT # L04000023868** 03-16-2006 90028 007 ****50.00 EXTREME ENTERPRISES LTD CO. Mailing Address Principal Place of Business 6810 TANGLEWOOD BAY DR. #316 6810 TANGLEWOOD BAY DR. #316 ORLANDO, FL 32821-9370 ORLANDO, FL 32821-9370 2. Principal Place of Business 3. Mailing Address 1608 Bridgeview 1608 Bridgeview Cincle Suite, Apt. #, etc. Suite, Apt. #, etc 03122006 CR2E083 (11/05) Chg-LLC City & State OR I an do Applied For 4. FEI Number City & State Octando 01-0778201 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired 32824 32824 us Fee Required us 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Moore, Donald M MOORE, DONALD M Street Address (P.O. Box Number is Not Acceptable) 6810 TANGLEWOOD BAY DR. #316 ORLANDO, FL 32821-9370 1608 Bridgeview Circle City Orlando, FL 8. 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. I am familiar with, and accept the obligations of registered agent. none SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM Change Addition TITLE TITLE MOORE, VIRGINIA B NAME NAME STREET ADDRESS 6810 TANGLEWOOD BAY DRIVE SUITE 316 STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ORLANDO, FL 32821 ☐ Change Addition TITLE Delete TITLE MOORE, DONELA M NAME NAME 6810 TANGLEWOOD BAY DRIVE SUITE 316 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32821 Channe ☐ Addition ☐ Delete TITLE TITLE MGRM Donald M. Moore 1608 Bridgeview Circle NAME NAME STREET ADDRESS STREET ADDRESS Octando, FL 32824 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE MERM Donald M. Moore II NAME NAME 1608 Bridgevicus Ciacle Octando, FL 32824 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition MBRM D. Mocke Delete TITLE TITLE KALEF NAME 1608 Bridgiview Lincle STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Orlando, FL 32824 ☐ Addition ☐ Change ☐ Detete TITLE TITLE Dante V. Moore NAME 1408 Bridgevices Cinda Onlando, FL 32824 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 trustge empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED