

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 29, 2002 8:00 am**  
**Secretary of State**

08-29-2002 90082 044 \*\*\*150.00

DOCUMENT # *P00000004759*  
1. Entity Name  
*Extreme Pizza, Inc.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <i>4636 W. Hwy. 192</i>		3. Mailing Address <i>4636 W. Hwy 192</i>	
Suite, Apt. #, etc. <i>Suite G.</i>		Suite, Apt. #, etc. <i>Suite G</i>	
City & State <i>Kissimmee, FL.</i>		City & State <i>Kissimmee FL.</i>	
Zip <i>34746</i>	Country <i>U.S.A.</i>	Zip <i>34746</i>	Country <i>U.S.A.</i>

DO NOT WRITE IN THIS SPACE

4. FEI Number <i>65-000-5318</i>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required		

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name <i>Donald Lemay</i>
Street Address (P.O. Box Number is Not Acceptable) <i>14516 Global Circle #3103</i>
City <i>ORLANDO</i>
State <b>FL</b>
Zip Code <i>32821</i>

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.

SIGNATURE *Donald Lemay, Pres.* *D Lemay* *8/3/02*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1, Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>P. Donald Lemay 14516 Global Circle Apt. #3103 ORLANDO, FL. 32821</i>
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald Lemay, Pres.* *D Lemay* *8/3/02* *407-477-7817*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Attachment

977157

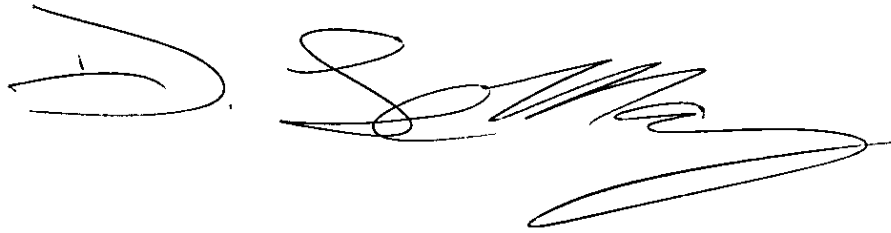
Extreme Pizza Inc.  
4636 W. HWY. 192  
Suite G  
Kissimmee, FL. 34746

To whom it may concern,

Extreme Pizza Incorporated, is filing the Annual Uniform Business Report late because the Division of Corporations had the incorrect address. Therefore the correct forms were never received to file in a timely manner.

Thankyou,

Donald LeMay  
President

A handwritten signature in black ink, appearing to read 'Donald LeMay', written in a cursive style.