

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020332

FILED  
Apr 23, 2005  
Secretary of State

Entity Name: EXTREME HALLOWEEN, INC.

## Current Principal Place of Business:

1206 STIRLING ROAD  
SUITE 9A & B  
DANIA BEACH, FL 33004

## New Principal Place of Business:

## Current Mailing Address:

1206 STIRLING ROAD  
SUITE 9A & B  
DANIA BEACH, FL 33004

## New Mailing Address:

FEI Number: 65-0985342

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRAPANI, CHRISTOPHER M  
200 EAST LAS OLAS BLVD., SUITE 1800  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAXWELL, HAROLD  
Address: 1250 NORTH DOUGLAS ROAD  
City-St-Zip: PEMBROKE PINES, FL 33024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD B. MAXWELL

PRES

04/23/2005

Electronic Signature of Signing Officer or Director

Date