

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90012 037 ***150.00

0100037 AT

DOCUMENT # P00000102629

1. Entity Name

EXTREME FIGHTING SPORTS, INC.

LA

Principal Place of Business

**7987 DEWARS CT
 JACKSONVILLE FL 32244**

Mailing Address

**7987 DEWARS CT
 JACKSONVILLE FL 32244**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TROTTI, DAVID P
 5571 PLAYA WAY
 JACKSONVILLE FL 32211**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent 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) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PSTD**
 STREET ADDRESS **MASZY, GENE**
 CITY-ST-ZIP **7987 DEWARS CT**
JACKSONVILLE FL 32244

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **VD**
 STREET ADDRESS **LORDEIRO, CHRISTOPHER**
 CITY-ST-ZIP **1673 CANTERBURY CIRCLE**
CASSELBERRY FL 32707

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/01 904-725-0536
 Date Daytime Phone #

CR2E034 (5/01)

Attachment

Doc. # 000000102629
B0065280

From: Gene Maszy
Extreme Fighting Sports, Inc.

To: Division of Corporations

RE: Request to forgive penalty

Please forgive the \$400 penalty fee and accept the \$150 payment I have enclosed. This is the first year that I have established a corporation and I was unfamiliar with reporting procedures. In good faith, I made an error when I forwarded this document to my CPA with the mistaken understanding that it was his responsibility to address this issue. I assure you that I have noted the annual responsibility and will not have a problem making a timely and prompt payment in subsequent years. Thank-you for your understanding.

Respectfully,



Gene Maszy