

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002169

FILED  
May 18, 2004  
Secretary of State

Entity Name: XTREME VERTICAL RIDES, INC.

**Current Principal Place of Business:**

10720 SW 141 AVE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 161648  
MIAMI, FL 331161648

**New Mailing Address:**

FEI Number: 01-0564506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALTARE, CARLOS  
10720 SW 142 AVE  
MIAMI, FL 33186 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALTARE, CARLOS  
Address: 10720 SW 142 AVE  
City-St-Zip: MIAMI, FL 33186

Title: S ( ) Delete  
Name: ALTARE, ELIZABETH  
Address: 10720 SW 142 AVE  
City-St-Zip: MIAMI, FL 33186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: CARLOS ALTARE

Electronic Signature of Signing Officer or Director

OWNE

05/18/2004

Date