

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053987

Entity Name: EXTREME FABRICS, INC.

FILED  
Jan 13, 2004  
Secretary of State

## Current Principal Place of Business:

6650 EMALYN COURT  
LAKE WORTH, FL 33467

## New Principal Place of Business:

901 COCHRAN DRIVE  
LAKE WORTH, FL 33461

## Current Mailing Address:

6650 EMALYN COURT  
LAKE WORTH, FL 33467

## New Mailing Address:

901 COCHRAN DRIVE  
LAKE WORTH, FL 33461

FEI Number: 87-0695626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORNEIL, CHAD  
6650 EMALYN COURT  
LAKE WORTH, FL 33467

## Name and Address of New Registered Agent:

CORNEIL, CHAD  
901 COCHRAN DRIVE  
LAKE WORTH, FL 33461

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: CHAD CORNEIL

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: CORNEIL, CHAD  
Address: 6650 EMALYN COURT  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: CORNEIL, CHAD  
Address: 6650 EMALYN COURT  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CORNEIL, CHAD  
Address: 901 COCHRAN DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

Title: D (X) Change ( ) Addition  
Name: COGHILL, TRENT  
Address: 122 MCFARLAND PLACE  
City-St-Zip: SAKSATOON, SK S7N4M2

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: CHAD CORNEIL

D

01/13/2004

Electronic Signature of Signing Officer or Director

Date