2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000081192

P.O. BOX 751296

DAYTON, OH 45458

Address:

City-St-Zip:

Entity Name: EXTREME RESEARCH, INC.

FILED Aug 22, 2006 Secretary of State

Littly Nai	He. EXTREM	IL KLOLAK	CH, INC.				
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
401 OCEA SUITE 205 MELBOUR		FL 32951	FL				
Current Mailing Address:				New Mailii	New Mailing Address:		
401 OCEA SUITE 205 MELBOUR		FL 32951	FL				
FEI Number:	: 16-1678273	FEI Numb	er Applied For()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Reg	gistered Agent:	Name and	Address of	New Registered Agent:	
910 N. DU	Y, CHARLES A VAL ST. SSEE, FL 323						
	named entity : e of Florida.	submits this	statement for the p	urpose of changing it	ts registered	office or registered agent, or both,	
SIGNATUR	RE:						
	Electror	nic Signatur	e of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () MCMURRY, CH 910 N. DUVAL TALLAHASSEE	ST.		Title: Name: Address: City-St-Zip:	RENO, FRANK 401 OCEAN A	K) Change()Addition K VE. SUITE 205 BEACH, FL 32951	
Title: Name: Address: City-St-Zip:	P () SEYFORTH, M 401 OCEAN AV MELBOURNE E	/E. SUITE 20		Title: Name: Address: City-St-Zip:	P (X DAVIS, JAMES P.O. BOX 751 DAYTON, OH	296	
Title: Name: Address: City-St-Zip:	VP (X DEBORD, MIKI P.O. BOX 7512 DAYTON, OH	296		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T (X DAVIS. JAMES) Delete R		Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: FRANK RENO T 08/22/2006