


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State

03-11-2005 90298 012 ***150.00

DOCUMENT # P04000050754	
1. Entity Name EXTREME AUTO SYSTEMS, INC.	

66026925



08302005 Chg-P CR2E034 (10/03)

Principal Place of Business 3911 S.W. 138 CT. MIAMI, FL 33175		Mailing Address 3911 S.W. 138 CT. MIAMI, FL 33175	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-1484261	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent VILLAVICENCIO, JOSE E 3911 S.W. 138 CT. MIAMI, FL 33175		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLAVICENCIO, JOSE E 3911 S.W. 138 CT. MIAMI, FL 33175 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEREZ, ANDRES P 3911 S.W. 138 CT. MIAMI, FL 33175 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 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

Date

Daytime Phone #

8-31-05

ATTACHMENT
P04000050754
66126925

AUGUST 30, 2005

SECRETARY OF STATE
ANNUAL REPORT SECTION

ATTACHED PLEASE FIND 2005 SUBSTITUTE ANNUAL REPORT SINCE WE NEVER RECEIVED THE ORIGINAL DOCUMENTS BACK FROM YOUR OFFICE, REQUESTING OUR FEDERAL IDENTIFICATION NUMBER. PLEASE ACCEPT OUR APOLOGIES.

viewcheck

ATTACHMENT

66026925 p04000050754

Print Close

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EXTREME AUTO SYSTEMS, INC.
5855 BRD ROAD
MIAMI FL 33153

1222

PAY TO THE ORDER OF Division of Corporations/Florida Dept of State \$ 150.00
One Hundred Fifty Dollars

DATE 2-17-05

FOR [Signature]

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT # 1000000000
MAR 11 2005
1 4 5 0

RECEIVED
MAR 11 2005
1 4 5 0

OFFICE OF THE
TREASURER
STATE OF FLORIDA
1000 BANKERS BUILDING
TALLAHASSEE, FL 32399-0001
TELEPHONE (904) 493-0001
FAX (904) 493-0002
WWW.FLORIDA.GOV

FFA0603606