2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096738

Entity Name: EXTREME CUSTOM BILLIARDS, INC.

FILED Apr 27, 2011 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|----------------------------------|---|--------------------------------------|
| 13227 BISCAYNE DR GRAND ISLAND, FL 32 | 735 | | |
| Current Mailing Address: | | New Mailing Address: | |
| 13227 BISCAYNE DRIVE GRAND ISLAND, FL 32 | | | |
| FEI Number: 20-1289407 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| CONOD, JOHN W 13227 BISCAYNE DRIVE GRAND ISLAND, FL 32 | = | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, |
| SIGNATURE: | | | |
| Electron | nic Signature of Registered Age | ent | Date |

OFFICERS AND DIRECTORS:

Title:

Name: CONOD, JOHN W
Address: 13227 BISCAYNE DR.
City-St-Zip: GRAND ISLAND, FL 32735

Title: VP

Name: CONOD, MARY R
Address: 13227 BISCAYNE DR.
City-St-Zip: GRAND ISLAND, FL 32735

Title: ST

Name: OSWALT, PATRICIA L Address: 33 PERIWINKLE DR City-St-Zip: DEBARY, FL 32713 US

I hereby 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 all other like empowered.

SIGNATURE: MARY R. CONOD VP 04/27/2011