

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005 8:00 am
Secretary of State

01-27-2005 90055 025 ***150.00

DOCUMENT # P04000123741			
1. Entity Name EXTREME ENGINEERING CORPORATION			
Principal Place of Business 2071 NW 125 TERRACE PEMBROKE PINES, FL 33028 US		Mailing Address 2071 NW 125 TERRACE PEMBROKE PINES, FL 33028 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent ADAY, ISIDRO R 2071 NW 125 TERRACE PEMBROKE PINES, FL 33028		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number's Not Accepted) City FL Zip Code	
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 designations of registered agent.			
SIGNATURE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	P/D ADAY, ISIDRO R 2071 NW 125 TERRACE PEMBROKE PINES, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	P/D GARCIA, HUMBERTO R 16731 NW 78 PLACE MIAMI LAKES, FL 33016 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	S/T ADAY, VIVIAN C 2071 NW 125 TERRACE PEMBROKE PINES, FL 33028 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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 a other I am empowered.			
SIGNATURE: <i>Isidro R. Aday</i>		1-15-05 President	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	

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01132005 Chg-P CR2E034 (10/03)

4. FCI Number **20-1587122** Added For Not Accepted

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**