

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000162019

**Entity Name:** EXTREME I.T. SOLUTIONS, INC.

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7245 PLANTAIN DR.  
ORLANOD, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

7245 PLANTAIN DR.  
ORLANOD, FL 32818

**New Mailing Address:**

**FEI Number:** 76-0773490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OLMEDA, JOSUE  
7245 PLANTAIN DR.  
ORLANDO, FL 32818 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: OLMEDA, JOSUE  
Address: 7245 PLANTAIN DR.  
City-St-Zip: ORLANDO, FL 32818

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: JOSUE OLMEDA

P

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date