

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 10 PM 2:36

DOCUMENT # P95000074685 (5)

1. Corporation Name

EXTREME E.I.F.S. INC.

Principal Place of Business

1304 S.W. 160TH AVENUE
SUITE 221
SUNRISE FL 33026-1902

Mailing Address

1304 S.W. 160TH AVENUE
SUITE 221
SUNRISE FL 33026-1902

3. Date Incorporated or Qualified
09/27/1995

3a. Date of Last Report

2. Principal Place of Business

21 231 S.W. 63 TERR

2a. Mailing Address

26 231 SW 63 TERR

4. FEI Number

65-0609622

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Pembroke Pines, FLA

Suite, Apt. #, etc.

27 Pembroke Pines, FLA.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

23 33023

City & State

28 33023

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

24 25 Broward

Zip

Country

29 30 Broward

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KENT, DANIEL H
4651 SHERIDAN STREET
SUITE 300
HOLLYWOOD FL 33021

81 Name

DANIEL H. KENT

82 Street Address (P.O. Box Number is Not Acceptable)

2872 SHERIDAN ST

83

Hollywood, FL 33021

84 City

Hollywood

FL

85 Zip Code

33021

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent or officer or director

Signature typed or printed name of registered agent or officer or director

5-8-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HARPER, CARLTON D JR
1304 S.W. 160TH AVENUE SUITE 221
SUNRISE FL 33326-1902

DELETE

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY - ST - ZIP
Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Carlton D. Harper, Jr. pres. 5-8-96 954-986-8679
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)