FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000088035 (6)

EXTREME SPORTS, INC.

Principal Place of Business

FILED May 05 1998 8:00am Secretary of State



04/22/20

Mailing Address 18788 N.W. 67TH AVENUE 16788 N.W. 67TH AVENUE MIAMI FL 33015 MIAMI FL 33015 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For Not Applicable 65-0730324 21 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PUERTO, CARLOS 16788 N.W. 67TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAM! FL 33015** 63 City Zip Code 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 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. ☐ DELETE 1.1 TITLE Change Addition TITLE **PUERTO, CARLOS** 1.2 NAME NAME 16788 N.W. 67TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33015** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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.