
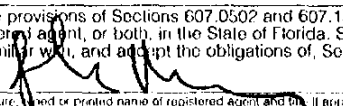


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Aug 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Worthington , Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000074104 (5) 1. Corporation Name EXTREME T'S INC.					
Principal Place of Business 705 PONDELLA ROAD. #1 NORTH FORT MYERS FL 33903			Mailing Address 705 PONDELLA ROAD. #1 NORTH FORT MYERS FL 33903		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/25/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0785478	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Zip	30	Country
9. Name and Address of Current Registered Agent MCLANEY, JONAH E 933 SE 25TH LANE CAPE CORAL FL 33904			10. Name and Address of New Registered Agent		
			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			85 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) DATE					
12. OFFICERS AND DIRECTORS					
TITLE	PRESIDENT <input type="checkbox"/> DELETE				
NAME	JONAH MCLANEY				
STREET ADDRESS	705 PONDELLA RD #1				
CITY-ST-ZIP	N. FORT MYERS, FL 33903				
TITLE	<input type="checkbox"/> DELETE				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	<input type="checkbox"/> DELETE				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					



DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: 

CR2E034 (10/97)

32
8.26



Cossentino & Orlando

Accountants
1402 Cape Coral Parkway
Cape Coral, Florida 33904
(941) 945-4939
Fax (941) 945-4938

pg 2

July 22, 1998

Florida Department of State
Div. of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: EXTREME T'S, INC.
DOC # P97000074104 (5)

Dear Ms. Brumbley:

I am the Accountant for the above-mentioned client. In March of 1998 we contacted the Department of State because my client did not receive their annual filing report. Apparently, for some reason, their annual report was sent back and we are not sure why, since the address was correct when we called Tallahassee.

We were told that another blank form would be sent immediately before the May 1, 1998 due date. In late April of 1998 we again called and informed the Department of State that we have not received a blank form. Finally, we received a second reminder form on July 05, 1998, after another telephone call was made.

We complained to the Department of State that, due to their error, we did not feel we were liable for the \$550.00 fee. I was advised to forward this letter explaining the circumstances, and that the \$150.00 fee would be accepted.

If you should have any questions, please feel free to contact me. Thank you for your kind consideration herein.

Very truly yours,

Sal Cossentino
Salvatore Cossentino

SC/db