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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED

99 MAY 19 PM 1:06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # PA8000038102

1. Corporation Name TOO EXTREME RENTALS INC

Principal Place of Business 25231 BUSY BEE LANE Mailing Address BONITA SPRINGS, FL 34135

2. Principal Place of Business 21 SAME 22 City & State 23 Zip Country 24 25 26 Mailing Address 26 SAME 27 City & State 28 Zip Country 29 30

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 4-27-98 4. FEI Number 59-3565822 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax [] Yes [] No

9. Name and Address of Current Registered Agent 81 Name DAVID JOHNSON 82 Street Address (P.O. Box Number is Not Acceptable) 25231 BUSY BEE LANE 83 84 City BONITA SPRINGS, FL FL 85 Zip Code 34135

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 DAVID JOHNSON David J Johnson 4-29-99

12. OFFICERS AND DIRECTORS 1. TITLE PRESIDENT/SECRETARY [] DELETE 2. NAME DAVID JOHNSON 3. STREET ADDRESS 25231 BUSY BEE LANE 4. CITY-ST-ZIP BONITA SPRINGS, FL 34135 5. TITLE VICE PRESIDENT/TREASURER [] DELETE 6. NAME GERALD IZELL 7. STREET ADDRESS PO BOX 177 8. CITY-ST-ZIP BONITA SPRINGS, FL 34133 9. TITLE [] DELETE 10. NAME 11. STREET ADDRESS 12. CITY-ST-ZIP 13. TITLE [] DELETE 14. NAME 15. STREET ADDRESS 16. CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE [] Change [] Addition 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE [] Change [] Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE [] Change [] Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE [] Change [] Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE [] Change [] Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE [] Change [] Addition 62 NAME 63 STREET ADDRESS 64 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, with all other like empowered

SIGNATURE: David J Johnson Pres 4-29-99

CR2E034 (11/98)

4/29/99