


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P98000038102**
 1. Corporation Name
TOO EXTREME RENTALS, INC.

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

If above addresses are incorrect in any way, line through incorrect information and enter correction below.
 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

FILED
 02 NOV 14 AM 10:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

 700009003847
 11/14/02--01062--005 **150.00
 4. Date Incorporated or Qualified To Do Business in Florida **04/27/1998**
 5. FEI Number **59-3565822** Applied For Not Applicable
 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PS	JOHNSON, DAVID	25231 BUSY BEE LANE	BONITA SPRINGS FL 34135
VPT	GERALD, IZELL	P.O. BOX 177	BONITA SPRINGS FL 34135

8. Name and Address of Current Registered Agent
JOHNSON, DAVID
 25231 BUSY BEE LANE
 BONITA SPRINGS FL 34135

9. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent *David Johnson* **SIGNATURE REQUIRED** Date 11/6/02
 REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE *David Johnson* **SIGNATURE REQUIRED** Date 11/6/02 (239) 774-0061
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E040 (8/02)



November 4, 2002

Division of Corporation
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: Too Extreme Rentals, Inc.
25231 Busy Bee Lane
Bonita Springs, FL 34135

Please find attached the annual report for the year 2002 for the above mentioned client. Also enclosed is a check in the amount of \$150 to cover the annual filing fee.

Mr. Johnson never received the annual report. Therefore, we request that any late fee for the year 2002 be waved.

Any further questions regarding this matter can be directed to me at this office Monday through Friday, between the hours of 11:00 AM and 5:00 PM.

Sincerely,

A handwritten signature in cursive script that reads "Helen Watson".

Helen Watson
President

HW/jaa

Attachment