

08301999-90005-048-\$550.00-\$550.00

AMOUNT DUE ON OR BEFORE 06/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000062421					
1. Corporation Name EXTREME AUTO ACCESSORY & AIR, INC.					

Principal Place of Business 12594 NORTH SUNRISE BLVD. SUNRISE FL 33323	Mailing Address 12594 NORTH SUNRISE BLVD. SUNRISE FL 33323
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2. Principal Place of Business 21 2540 N.W. Oak Ridge Dr		2a. Mailing Address 21 2540 N.W. Oak Ridge Dr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22 Back Rtn. FL		27 Back Rtn. FL	
City & State		City & State	
23 33432		28 33432	
Zip		Zip	
Country		Country	
24 33432		29 33432	
Zip		Zip	
Country		Country	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	
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FILED
99 OCT -1 PM 1:54
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

8/30/99 90005048 \$550.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/15/1998	
4. FEI Number 65-0851498	Applied For Not Applicable
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 ☐ Yes ☐ No	

10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
FL	85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1506, 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 this appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE		Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE									
12. OFFICERS AND DIRECTORS								13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
1.1 TITLE ☐ DELETE								1.1 TITLE ☐ Change ☐ Addition							
NAME Damon DeSantis								1.2 NAME							
STREET ADDRESS 12594 N. Sunrise Blvd.								1.3 STREET ADDRESS							
CITY-STATE-ZIP SUNRISE, FL 33323								1.4 CITY-STATE-ZIP							
2.1 TITLE ☐ DELETE								2.1 TITLE ☐ Change ☐ Addition							
NAME Kim Donovan								2.2 NAME							
STREET ADDRESS 11731 N.W. 34th PL								2.3 STREET ADDRESS							
CITY-STATE-ZIP SUNRISE FL 33323								2.4 CITY-STATE-ZIP							
3.1 TITLE ☐ DELETE								3.1 TITLE ☐ Change ☐ Addition							
NAME								3.2 NAME							
STREET ADDRESS								3.3 STREET ADDRESS							
CITY-STATE-ZIP								3.4 CITY-STATE-ZIP							
4.1 TITLE ☐ DELETE								4.1 TITLE ☐ Change ☐ Addition							
NAME								4.2 NAME							
STREET ADDRESS								4.3 STREET ADDRESS							
CITY-STATE-ZIP								4.4 CITY-STATE-ZIP							
5.1 TITLE ☐ DELETE								5.1 TITLE ☐ Change ☐ Addition							
NAME								5.2 NAME							
STREET ADDRESS								5.3 STREET ADDRESS							
CITY-STATE-ZIP								5.4 CITY-STATE-ZIP							
6.1 TITLE ☐ DELETE								6.1 TITLE ☐ Change ☐ Addition							
NAME								6.2 NAME							
STREET ADDRESS								6.3 STREET ADDRESS							
CITY-STATE-ZIP								6.4 CITY-STATE-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.

SIGNATURE: **Kim Donovan** Date: **8/10/99**

CR2E034 (5/89)

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