2005 FOR PROFIT CORPORATION

Apr 29, 2005 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P98000062733 04-29-2005 90211 005 ***150.00 EXTREME RAGE ALTERNATIVE SPORTS INC. Principal Place of Business Mailing Address 3598 FOWLER ST. 2419 EAST MALL DR FORT MYERS, FL 33901 FT. MYERS, FL 33905 04202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 65-0876593 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ADAMSON, TODD DO NOT WRITE 1540 HONOR CT LEHIGH ACRES, FL 33971 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE ADAMSON, TODD NAME STREET ADDRESS 1540 HONOR CT CITY-ST-ZIP LEHIGH ACRES, FL 33971 IIII F NAME STREET ADDRESS CITY-ST-ZIP TITLE NUME SIRFFI ADD RES DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP me NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP

FILED