Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90207 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherina Harris

Secretary of State DIVISION OF CORPORATIONS

i. Carporatio	MENT # P980000 S EXTREME TAN, INC.	070892					
Principal Pla:	e of Business	Mailing Address			OTTE ANTIL ENTER ANTERE FOLIA	INTERNATION	
,		-					
1431-B CYPRES		1431-B CYPRESS DR. Jupiter Fl 33469		1			
JUPITER FL 33	MC9	ARLITER 1 C 20463		DO NOT WRITE	IN THIS SPACE		
			٠	-3. Date Incorporated or Qualifed			
			`	08/10/1998		\	ı
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Nur iber	Apı	oled For	ı
21		26		65-0856404	Not	/upplicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	, \$8.75 A		l
22		27		5. Certificate of Status Desired	Fee Re	quired	1
City,& Stat	8	City & State		6. Election Campaign Financing	\$5.00	Vay Be	
23		28		Trust Find Contribution	Added to	o Fees	1
Zíp	Country	Zip	Country	8. This co poration owes the current			ı
24	25	29	30	Person il Property Tax.	Yes	[]No	ı
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	istere Agent		i
			81 Name			İ	ı
	aci, stephen		82 Street Ad tr	ress (P.O. Box Number is Not Acceptable	1		1
	1-B CYPRESS DA.				·		1
JUP	ITER FL 33469		83			j	;
Į.			84 City		85 Zip C	- de	i
[FLI	- 1	ı
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statule	s, the above-named corp	poration submits this statement for the pur	pose of changing its	ragisterød (,	
agent. · a	ım familiar with, and accept the congati.	ons oi, section 607.0505, Pkin	ua Glaiutes.	oration submits this statement for the pur on's board of cirectors. I hereby accept th	~	stered	,
agent. a SIGNATUFE	m familiar with, and at cept the congati-	and ritle of applicable (NOT :: 1	Registered Agent signature require	id when reinstating)	DATE		(86
signature	m familiar with, and at cept the congain. Signature, typed of prividing me of registered agent. OFFICERS AND	and title of empire and title of empire and title of empire and title of empire and title of the	Registered Agent signature require		ONTE ERS UND DURECTO	LS IN 12	11/98)
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6.4 CITY-ST-ZIP 14. Here by 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 annual report or supplemental annual report is true and accurate and that my significance shall have the same legal effect as if made under oath; that I am an office, or director of the corporation or the rock iver 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 empowerer.

SIGNATURE: _

CITY-ST-ZIP

511)745-0790