

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047149

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** EXTREME RESTORATION SERVICES, INC.

**Current Principal Place of Business:**

1500 NW 1ST STREET  
1J  
DANIA BEACH, FL 33304

**New Principal Place of Business:**

1500 NW 1ST STREET  
1J  
DANIA BEACH, FL 33004

**Current Mailing Address:**

1500 NW 1ST STREET  
1J  
DANIA BEACH, FL 33304

**New Mailing Address:**

1500 NW 1ST STREET  
1J  
DANIA BEACH, FL 33004

**FEI Number:** 65-0944545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOGERMAN, RICHARD M  
150 S. PINE ISLAND ROAD  
SUITE 330  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOGERMAN, MICHAEL A  
Address: 5431 SW 109TH AVE  
City-St-Zip: DAVIE, FL 33328 US

Title: SEC  
Name: MOGERMAN, LINDA D  
Address: 5431 SW 109TH AVE  
City-St-Zip: DAVIE, FL 33328 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL A. MOGERMAN

PRES

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date