

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90237 034 ***150.00

DOCUMENT # P99000047341

1. Entity Name

EXTREME INSTALLATIONS INCORPORATED

11117 W Okeechobee Road #101
Hialeah FL 33018

2. Principal Place of Business

8821 N.W. 153rd Terrace

3. Mailing Address

8821 N.W. 153rd Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami Lakes Florida

City & State
Miami Lakes Florida

4. FEI Number

65-0926320

Applied For

Not Applicable

Zip 33018

Country U.S.A.

Zip 33018

Country U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

8821 N.W. 153rd Terrace

City Hialeah

FL

Zip Code 33018

RODRIGUEZ, REYNALDO
11117 W Okeechobee Road #101
Hialeah FL 33018

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVPTS RODRIGUEZ, REYNALDO 8821 N.W. 153rd Terrace Miami Lakes Florida 33018	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2002

Date

362-9139

Daytime Phone #