

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000049927

1. Entity Name

TO THE EXTREME, INC.

Principal Place of Business

1808 S YOUNG CIRCLE
HOLLYWOOD FL 33020

Mailing Address

1808 S YOUNG CIRCLE
HOLLYWOOD FL 33020

2. Principal Place of Business

1808 S. Young Circle
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Mld. FL

City & State

FL

4. FEI Number

65-0927482

Applied For

Not Applicable

Zip

33020

Country

USA

Zip

33020

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WHARTON, MARIA
1719 LINCOLN ST
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name

Joseph Deluise

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

1771 NE 175 St.

City

NMB

FL

Zip Code

33162

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

Maria Wharton
Signature, typed or printed name of registered agent and applicable

NOTE: Registered Agent Signature Required
Joseph Deluise

DATE
2-26-2001

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

FILE NOW!!! FEE \$150.00
After MAY 1, 2001 Fee will be \$550.00
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	P	NAME	WHARTON, MARIA T	STREET ADDRESS	1719 LINCOLN ST	CITY-ST-ZIP	HOLLYWOOD FL 33020	☒ Delete	☒ Change
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete	
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete	
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete	
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete	
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Delete	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	OWNER / President	NAME	Joseph Deluise	STREET ADDRESS	1771 NE 175 St.	CITY-ST-ZIP	NMB FL 33162	☒ Change	☐ Addition
TITLE	VICE President	NAME	Brown Rodriguez	STREET ADDRESS	1771 NE 175 St.	CITY-ST-ZIP	NMB FL 33162	☒ Change	☐ Addition
TITLE	SECRETARY	NAME	MARIA Wharton	STREET ADDRESS	1719 Lincoln St.	CITY-ST-ZIP	HOLLYWOOD FL 33020	☒ Change	☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change	☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change	☐ Addition
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		☐ Change	☐ Addition

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 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maria Wharton
Signature and typed or printed name of signing officer or director

Joseph Deluise
Signature and typed or printed name of signing officer or director

Date

Daytime Phone

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-12-2001 90388 001 ***150.00

03-12-2001 90388 002 *****8.75



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)