

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000004385

**FILED**  
**Oct 08, 2007**  
**Secretary of State**

**Entity Name:** LANDMARK EVENT STAFFING SERVICES, INC.

**Current Principal Place of Business:**

4131 HARBOR WALK DR.  
FT. COLLINS, CO 80525

**New Principal Place of Business:**

**Current Mailing Address:**

4131 HARBOR WALK DR.  
FT. COLLINS, CO 80525

**New Mailing Address:**

4790 IRVINE BLVD.  
105-323  
IRVINE, CA 92620

FEI Number: 20-4345212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LUTZ, TIM  
1910 GULF VIEW DR.  
HOLIDAY, FL 34691 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: TIM LUTZ

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

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PC ( ) Delete  
Name: KRANSKE, PETER C  
Address: 4131 HARBOR WALK DR.  
City-St-Zip: FT. COLLINS, CO 80525

Title: VCTS ( ) Delete  
Name: HARRISON, MICHAEL S  
Address: 30 CEDARBROOK  
City-St-Zip: IRVINE, CA 92620

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL HARRISON

VCTS

10/08/2007

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

\_\_\_\_\_  
Date