## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000003271

FILED Mar 04, 2008 Secretary of State

Entity Na	me: XSTREA	M SYSTEMS, INC.			
Current P	rincipal Place	of Business:	New Principal Place of Business:		
	ND TERRACE AN, FL 32958	S, SUITE 101			
Current Mailing Address:			New Mailing Address:		
	ND TERRACE N, FL 32958	s, SUITE 101			
FEI Number: 20-1180466 F		FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
777 S. FLA WEST PA The above	AGLER DR #50 LM BEACH, FI	_ 33401 US	purpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI					
SIGNATO		nic Signature of Registered Ag	ent	 Date	
Election Car		g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	MAYO, BRIAN	TERRACE, SUITE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CLOCK, ALAN	TERRACE, SUITE 101	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	GOLDBAUM, R	TERRACE, SUITE 101	Title: Name: Address: City-St-Zip:	CFO (X) Change ( ) Addition BUTLER, CHRISTIE C 10305 102ND TERRACE, SUITE 101 SEBASTIAN, FL 32958	
Title: Name: Address: City-St-Zip:	PAUL, MICCICI	TERRACE, SUITE 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	( )	) Delete	Title: Name: Address:	CEO ( ) Change (X) Addition COOK, THOMAS W 10305 102ND TERRACE SUITE 101	

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.

City-St-Zip: SEBASTIAN, FL 32958

SIGNATURE: CHRISTIE C. BUTLER **CFO** 03/04/2008

City-St-Zip: