

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F04000003271

Entity Name: XSTREAM SYSTEMS, INC.

**FILED**  
**Oct 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10305 102ND TERRACE, SUITE 101  
SEBASTIAN, FL 32958

**New Principal Place of Business:**

**Current Mailing Address:**

10305 102ND TERRACE, SUITE 101  
SEBASTIAN, FL 32958

**New Mailing Address:**

FEI Number: 20-1180466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CORPORATE SERVICE COMPANY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CTO  
Name: MAYO, BRIAN T  
Address: 10305 102ND TERRACE, SUITE 101  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP  
Name: CLOCK, ALAN D  
Address: 10305 102ND TERRACE, SUITE 101  
City-St-Zip: SEBASTIAN, FL 32958

Title: CFO  
Name: CUMMINGS, DENNIS K  
Address: 10305 102ND TERRACE, SUITE 101  
City-St-Zip: SEBASTIAN, FL 32958

Title: VP  
Name: PAUL, MICCICHE J  
Address: 10305 102ND TERRACE, SUITE 101  
City-St-Zip: SEBASTIAN, FL 32958

Title: CEO  
Name: CHIDONI, ANTHONY  
Address: 10305 102ND TERRACE, SUITE 101  
City-St-Zip: SEBASTIAN, FL 32958

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: DENNIS CUMMINGS

CFO

10/06/2010

Electronic Signature of Signing Officer or Director

Date