

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000019516

Entity Name: XTREMESTRUCTURES, INC.

**FILED**  
**Nov 05, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

380 SOUTH STATE ROAD 434  
SUITE 1004-378  
ALTAMONTE SPRINGS, FL 327143810

## **Current Mailing Address:**

380 SOUTH STATE ROAD 434  
SUITE 1004-378  
ALTAMONTE SPRINGS, FL 327143810

## **New Principal Place of Business:**

4801 FEATHER RIVER BOULEVARD  
SUITE 17  
ORVILLE, CA 95965 US

## **New Mailing Address:**

4801 FEATHER RIVER BOULEVARD  
SUITE 17  
ORVILLE, CA 95965 US

FEI Number: 59-3700912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## **Name and Address of New Registered Agent:**

SCHMIDT, TIM  
380 SOUTH STATE ROAD 434  
SUITE 1004  
ALTAMONTE SPRINGS, FL 327143810 US

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: TIMOTHY SCHMIDT

11/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: RUSTICI, JANET L  
Address: 380 SOUTH STATE ROAD 434 SUITE 1004  
City-St-Zip: ALTAMONTE SPRINGS, FL 327143810

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: SD (X) Change ( ) Addition  
Name: RUSTICI, JANET L  
Address: 4801 FEATHER RIVER BOULEVARD, SUITE 17  
City-St-Zip: ORVILLE, CA 95965 US

Title: PD ( ) Change (X) Addition  
Name: SCHMIDT, TIMOTHY  
Address: 4801 FEATHER RIVER BOULEVARD, SUITE 17  
City-St-Zip: ORVILLE, CA 95965 US

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: TIMOTHY SCHMIDT

PRES

11/05/2007

Electronic Signature of Signing Officer or Director

Date