

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 DEC 10 PM 1:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000050923

1. Corporation Name

Extreme Image International, Inc

1019 Hancock Bridge Pkwy

2. Principal Office Address

Suite, Apt. #, etc.

City & State

Cape Coral, FL

Zip

33990

Country

3. Mailing Office Address

1019 Hancock Bridge Pkwy

Suite, Apt. #, etc.

City & State

Cape Coral FL

Zip

33990

Country

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-0808902

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Harry T. Meisenbach

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

1019 Hancock Bridge Pkwy

Suite, Apt. #, Etc.

City

Cape Coral

State
FL

Zip Code
33990

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

See below

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Vice Pr	Kerinn Ann Meisenbach	1019 Hancock Bridge Pkwy	Cape Coral, FL 33990
Presidn	Mary Agnes Meisenbach	1019 Hancock Bridge Pkwy	Cape Coral, FL 33990
Treasr	Harry T. Meisenbach	1019 Hancock Bridge Pkwy	Cape Coral, FL 33990

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12/10/04--01035--004 **150.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harry T. Meisenbach 12/7/04

Date

239-573-7806

Daytime Phone #

CR2E081 (01/04)

PS 282

Myrtle C. Arceneaux CPA, PA

(A Corporation of Independent Accountants)

MD Arceneaux Financial Services

1323 Lafayette Street Suite (A)

Cape Coral, FL 33904

239-542-2721

239-542-2721 Fax

maswfl@earthlink.net

www.arceneauxcpa.com

November 8, 2004

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed is a corporation reinstatement for Extreme Image International, Inc. The owner and shareholders would like to abate the fees for reinstatement. This is a new corporation and they did not know the filing requirements for the State of Florida. Also they never received the annual report to file for the corporation.

Sincerely,



Michael Arceneaux, CPA
1323 Lafayette St Ste A
Cape Coral, FL 33904
(239) 542-2721