

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000120333

1. Entity Name
XTREME PRINT OF FLORIDA, CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT -4 AM 10: 38

Principal Place of Business
480 NW 98TH COURT
MIAMI, FL 33172

Mailing Address
480 NW 98TH COURT
MIAMI, FL 33172

08/09/05 90001 022 \$150.00



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

10032005 REIN-P CR2E098 (6/04)

City & State
Zip Country

City & State
Zip Country

4. FEI Number
20-1526683

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOMEZ, HORACIO A
480 NW 98TH COURT
MIAMI, FL 33172

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOMEZ, HORACIO A 480 NW 98TH COURT MIAMI, FL 33172	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314


TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT ON AUGUST 2005 I SUBMITTED THE ANNUAL REPORT AND I GOT A REJECTED LETTER ON SEPTEMBER TELLING ME THAT I OWE \$ 400.00 OF PENALTY, BUT THE THING IS THAT I DID NOT KNOW THAT COMPANIES HAVE TO PAY AN ANNUAL FEE BECAUSE I NEVER RECEIVE THE NOTICE FROM YOUR OFFICE TELLING ME ABOUT THAT ANNUAL FEE.

AND AS PER YOUR INSTRUCTION I AM ENCLOSING A COPY OF THE 2005 ANNUAL REPORT AND THIS LETTER IN ORDER TO AVOID THE PENALTIES AND TO PUT MY COMPANY ACTIVE.

I REALLY APPRECIATE ALL YOUR HELP IN THIS MATTER, AND IF YOU HAVE ANY FURTHER QUESTION PLEASE DO NOT HESITATE TO CONTACT US.

CORDIALLY



HORACIO A GOMEZ
PRESIDENT