

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000119376

Entity Name: XTREME HAULING, INC.

**FILED**  
**Jun 26, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

13157 SPRING HILL DRIVE  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

2209 COLLIER PKWY  
LAND O LAKES, FL 34639

**New Mailing Address:**

FEI Number: 06-1792621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUFF, MIKE  
2209 COLLIER PKWY  
LAND O LAKES, FL 34639 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DASCH, JOHN R  
Address: 11281 SHEFFIELD ROAD  
City-St-Zip: SPRING HILL, FL 34608 US

Title: V ( ) Delete  
Name: RUFF, MIKE  
Address: 2209 COLLIER PARKWAY  
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: S ( ) Delete  
Name: MURRAY, MICHAEL S  
Address: 18148 HANSON RD  
City-St-Zip: LAND O LAKES, FL 34639

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: PINA, JOHN  
Address: 4727 JACQUELINE DR  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: MIKE RUFF

P

06/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date