

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000012666

Entity Name: XTREME CARPET CARE, INC.

FILED
Jun 28, 2009
Secretary of State

Current Principal Place of Business:

1111 CIRCLE COURT
LEHIGH ACRES, FL 33971

New Principal Place of Business:

27695 BAY POINT LANE
BONITA SPRINGS, FL 34134

Current Mailing Address:

1111 CIRCLE COURT
LEHIGH ACRES, FL 33971

New Mailing Address:

PO BOX 43
BONITA SPRINGS, FL 34134

FEI Number: 20-8326484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROIANO, JOSEPH A
12800 UNIVERSITY DRIVE, SUITE 380
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

DEVINE, ROBERT N
27695 BAY POINT LANE
BONITA SPRINGS, FL 34134 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: ROBERT N. DEVINE

06/28/2009

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DEVINE, ROBERT N
Address: 1111 CIRCLE COURT
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DEVINE, ROBERT N
Address: 27695 BAY POINT LANE
City-St-Zip: BONITA SPRINGS, FL 34134

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: ROBERT N. DEVINE

PSTD

06/28/2009

Electronic Signature of Signing Officer or Director

Date