

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000046492

FILED
Sep 30, 2008
Secretary of State

Entity Name: XTREME DANCE OF MIAMI, INC.

Current Principal Place of Business:

13920 SW 30 ST.
MIAMI, FL 33175

New Principal Place of Business:

15453 SW 36 TERR
MIAMI, FL 33185

Current Mailing Address:

13920 SW 30 ST.
MIAMI, FL 33175

New Mailing Address:

15453 SW 36 TERR
MIAMI, FL 33185

FEI Number: 36-4607649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMORES, ALICIA
13920 SW 30 ST.
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

AMORES, ALICIA
15453 SW 36 TERRACE
MIAMI, FL 33185 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: ALICIA AMORES

09/30/2008

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: PRES () Delete
Name: AMORES, ALICIA
Address: 13920 SW 30 ST.
City-St-Zip: MIAMI, FL 33175

Title: VP () Delete
Name: AMORES, DANIEL
Address: 13920 SW 30 ST.
City-St-Zip: MIAMI, FL 33175

Title: SEC () Delete
Name: PORTUGUES, HENRY
Address: 14331 SW 22 ST.
City-St-Zip: MIAMI, FL 33175

Title: TREA () Delete
Name: AMORES, ALICIA
Address: 13920 SW 30 ST.
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: AMORES, ALICIA
Address: 15453 SW 36 TERR
City-St-Zip: MIAMI, FL 33185

Title: VP (X) Change () Addition
Name: AMORES, DENISE
Address: 15453 SW 36 TERR
City-St-Zip: MIAMI, FL 33185

Title: SEC (X) Change () Addition
Name: PORTUGUES, LINETTE
Address: 15453 SW 36 TERR
City-St-Zip: MIAMI, FL 33185

Title: TREA (X) Change () Addition
Name: AMORES, DENISE
Address: 15453 SW 36 TERR
City-St-Zip: MIAMI, FL 33185

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: ALICIA AMORES

PRES

09/30/2008

Electronic Signature of Signing Officer or Director

Date