

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000060830

1. Entity Name

XTREME DESIGN, INC.

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

05-03-2000 90024 012 \*\*\*150.00

Principal Place of Business

Mailing Address

500 SOUTH BELCHER ROAD #188  
 LARGO FL 33771

500 SOUTH BELCHER ROAD #188  
 LARGO FL 33771-2770

2. Principal Place of Business

3. Mailing Address

5490 6th STREET So.

5490 6th STREET So.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ST. PETERSBURG, FL

ST. PETERSBURG, FL

Zip 33705

Country USA

Zip 33705

Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3522007

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HALL, MELODY  
 500 SOUTH BELCHER ROAD  
 APARTMENT 188  
 LARGO FL 33771

Name

MELODY ~~STONE~~ HALL STONE

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

5490 6th STREET SOUTH

City

ST. PETERSBURG

FL

Zip Code

33705

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.

SIGNATURE

*[Signature]* PRES, MELODY HALL STONE 4/24/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS  
 NAME HALL, MELODY  
 STREET ADDRESS 500 SOUTH BELCHER ROAD #188  
 CITY-ST-ZIP LARGO FL 33771 ☐ Delete

TITLE PS  
 NAME MELODY ~~STONE~~ HALL STONE ☒ Change ☐ Addition  
 STREET ADDRESS 5490 6th STREET So.  
 CITY-ST-ZIP ST. PETERSBURG, FL 33705

TITLE VT  
 NAME STONE, JOHN  
 STREET ADDRESS 500 SOUTH BELCHER ROAD #188  
 CITY-ST-ZIP LARGO FL 33771 ☐ Delete

TITLE VT  
 NAME JOHN STONE ☒ Change ☐ Addition  
 STREET ADDRESS 5490 6th STREET So.  
 CITY-ST-ZIP ST. PETERSBURG, FL 33705

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

*[Signature]* MELODY HALL STONE PRES 4/24/00 1-727-865-3918

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #