

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated aven	age burden hours
per response	

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Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et. seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

DMEAST #9648403 v1

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and m	anaging partner of	partnership issuers.			
Check Box(es) that Apply:		⊠ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Oglum, Scott R.					
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
250 Corporate Boulevard, Sui	ites E & F, Newark	, Delaware 19702			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Vincenzo, James J.					
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
250 Corporate Boulevard, Sui	ites E & F. Newark	, Delaware 19702			
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner		⊠Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Schakelman, Justin L.					
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)		•	
250 Corporate Boulevard, Sui	ites E & F, Newark	., Delaware 19702			
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	⊠Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		•		
Warren, Kenneth D.		•			
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)		• •	
250 Corporate Boulevard, Sui	ites E & F, Newark	, Delaware 19702			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	□Director	☐General and/or Managing Partner
Full Name (Last name first, if	individual)		• • •		
Werwinski, Robert		•			
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
3 Chipmunk Lane, Kennett Sc	quare, PA 19348				
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	☐Executive Officer	⊠Director	☐General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hludzinski, David					÷
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
250 Corporate Boulevard, Sui	ites E & F, Newark	, Delaware 19702			
Check Box(es) that Apply:	Promoter	☐Beneficial Owner	☐Executive Officer	⊠Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Ludlow, W. James					
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			
250 Corporate Boulevard, Sui	ites E & F, Newark	. Delaware 19702			
Check Box(es) that Apply:	Promoter	☐Beneficial Owner	☐Executive Officer	⊠Director	☐General and/or Managing Partner
Full Name (Last name first, if Silber, H. Gregory	individual)				
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			•
250 Corporate Boulevard, Sui		-			
DMEACT HOOMS IN					

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first, it	f individual)		·		
Oglum, Linda					
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)			
c/o 250 Corporate Boulevard,	, Suites E & F, Nev	ark, Delaware 19702			

					В.	INFORM	ATION AE	OUT OFF	ERING				
L H	las the	e issuer so	ld, or does t	he issuer in	tend to sell	to non-acc	redited inve	stors in this	offering?				Yes No □ ⊠
••	ius iii	0 150401 50		ile Kibaer III			ndix, Colun						
2. V	Vhat i	s the minit	mum invest	ment that w			y individua		-				\$40,000
					•							•	Yes No
3 . D	Does tl	he offering	permit joir	nt ownership	of a single	e unit?							$\boxtimes \Box$
si a: d	imilar ssocia lealer.	remunera ited persor If more t	tion for sol	icitation of of a broker of persons to	purchasers or dealer re	in connecti gistered w	en or will to on with sale the SEC ed persons o	es of securi and/or with	ties in the o	offering. If states, list	a person to the name of	be listed in the broke	s an r or
			first, if ind ment LLC	ividual)									
			Address (N m, New Jer		Street, City	y, State, Zip	Code)						
Name	of As	sociated B	roker or De	ealer									
			n Listed Ha										
) [AL]		c "All State [AK]	es" or check						(DC)			_	All States
[IL	-	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
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i uii i v	iaine (Last name	tirst, ir ma	ividuai)									
Busine	ess or	Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name	of As	sociated B	roker or De	aler								•	
			n Listed Ha									_	
() [AL]		C"All State [AK]	es" or check [AZ]	individual [AR]	[CA]	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]]All States [ID]
[IL	-	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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				,									
Busine	ess or	Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
Name	of As	sociated B	roker or De	aler								<u> </u>	
States	in Wi	hich Perso	n Listed Ha	s Solicited o	or Intends t	o Solicit Pu	rchasers		•				
(0	Check	c"All State	es" or check	c individual	States)	······							All States
[AL [IL		[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
[M]	Γ)	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering,			
	check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	o	Aggregate ffering Price	Amount Already Sold
	Debt	\$	500,000	\$ 500,000
	Equity	s	0	\$0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$	0(1)	\$0
	Partnership Interests	\$	0	\$0
	Other	\$	0	\$0
	Total	\$	500,000 ⁽¹⁾	\$500,000
epa	Answer also in Appendix, Column 3, if filing under ULOE. Warrants to purchase shares of the Issuer's common stock are being offered together with the debentures; there is no rate charge for the warrants. Warrants to purchase shares of the Issuer's common stock are being paid as part of a finders' All warrants are exercisable at \$1.00 per share for a term of five years. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" is answer is "none" or "zero."			
	Accredited Investors		Number Investors	Aggregate Dollar Amount of Purchases \$ 500,000
	Non-accredited Investors		0	\$ 0
		.	<u> </u>	\$
	Total (for filings under Rule 504 only)		. <u>.</u> .	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question I.			•
	Type of offering		Type of	Dollar Amount
	Rule 505	ç	Security	Sold
	Regulation A	٠ —		\$
	-	<u>ه_</u>		
	Rule 504	S		\$
	Total	S		\$
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		. 🛭 S	500
	Printing and Engraving Costs		. ⊠ \$	500
	Legal Fees		. ⊠ S	30,000
	Accounting Fees		. 🗆 s	
	Engineering Fees		. 🗆 \$	
	Finders' Fees		_	40,000(2)
	Sales Commissions (specify finders' fees separately)			
	Other Expenses (identify) State Filing Fees	•••••	. 🛛 \$	150
	Total		. 🛛 \$	71,150 ⁽²⁾

⁽²⁾ Plus warrants to purchase 40,000 shares at \$1,00 per share.

	C. OFFERING PRICE	, number of investors, expenses and usi	S OF PRO	CEEDS		
5.	Question 1 and total expenses furnished in adjusted gross proceeds to the issuer."	egregate offering price given in response to Part C - response to Part C - Question 4.a. This difference is the			\$ <u>42</u> 8	3,850
	nd check the box to the left of the estimate	unt for any purpose is not known, furnish an estimate The total of the payments listed must equal the th in response to Part C – Question 4.b above.			•	
·			Off Direc	ents to icers, tors, & liates		ments To Others
	Salaries and fees		□\$	0	s	0
	Purchase of real estate		□ \$	0	_ 🗆 \$	0
	Purchase, rental or leasing and install	ation of machinery and equipment	□ \$	0	_ 🗆 \$	0
	Construction or leasing of plant build	ings and facilities	 \$	0	_ s	0
	offering that may be used in exchange	ding the value of securities involved in this for the assets or securities of another	□ \$	0	_ 🗆 \$	0
	Repayment of indebtedness		\$	0	_ 🗀\$	0
	Working capital		□\$	0	_ 🗆 🗆	428,850
	Other (specify) Advertising		□ \$	0	_ 🗆\$	0
	Column Totals		 \$	0	_ ⊠\$	428,850
	Total Payments Listed (column totals	added)		\$42	28,850	
		D. DODDD II GIGNI MIDD				
The i	cuar has duly caused this notice to be sign	D. FEDERAL SIGNATURE and by the undersigned duly authorized person. If this n	atica is file	d under E	ule 505	the following
signa	ure constitutes an undertaking by the issue	er to furnish to the U.S. Securities and Exchange Comm ccredited investor pursuant to paragraph (b)(2) of Rule 5	ission, upo			
	(Print or Type) rer Xtreme Entertainment Group, Inc.	Signature	Date Octobe	er 24, 200	6	
Name	of Signer (Print or Type)	Type of Signer (Print or Type)	•			
Scott	R. Oglum	By: Chief Executive Officer				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIG	NATURE			
1.	Is any party described in 17 CFR 230.262 p	presently subject to any of the	disqualification provision	ıs	Yes	No
	of such rule?	•••••	***************************************	••••••		
		See Appendix, Column 5,	for state response.			
2.	The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required		nistrator of any state in w	hich this notice is	filed, a noti	ce on Form D
3.	The undersigned issuer hereby undertakes offerees.	to furnish to the state admin	istrators, upon written rec	quest, information t	furnished by	the issuer to
4.	The undersigned issuer represents that the Offering Exemption (ULOE) of the state in has the burden of establishing that these co	which this notice is filed and				
	e issuer has read this notification and knows t y authorized person.	the contents to be true and has	duly caused this notice to	be signed on its be	chalf by the	undersigned
Issi	ter (Print or Type)	Signature		Date		
	eater Xtreme Entertainment Group, Inc.			October 24, 2	006	
Nai	me (Print or Type)	Title (Print or Type)				
_	ott R. Oglum	Chief Executive Officer				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.