

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054392

FILED
May 06, 2007
Secretary of State

Entity Name: EXPERT COURIER SERVICE, L.L.C.

Current Principal Place of Business:

10651 SW 108TH AVENUE
3F
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10651 SW 108TH AVENUE
3F
MIAMI, FL 33176

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SALAS, RAUL ESQ.
C/O SALAS, EDE, PETERSON & LAGE, L.L.C.
6333 SUNSET DRIVE
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

SALAS, RAUL ESQ.
C/O SALAS, EDE, PETERSON & LAGE, L.L.C.
6301 SUNSET DRIVE
SOUTH MIAMI, FL 33143 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:

05/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: PERDEW, JESSICA L
Address: 10651 SW 108TH AVENUE, UNIT 3F
City-St-Zip: MIAMI, FL 33176

Title: OFF () Delete
Name: FERREIRA, SERGIO
Address: 10651 SW 108TH AVENUE, UNIT 3F
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES:

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JESSICA L. PERDEW

PRES

05/06/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date