

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071913

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: EXPRESS PARCEL SERVICE INTERNATIONAL (EPS), LLC

**Current Principal Place of Business:**

2222 PONCE DE LEON BLVD.  
PENTHOUSE SUITE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2222 PONCE DE LEON BLVD.  
PENTHOUSE SUITE  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 06-1796594      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODON-ALVAREZ, MARY LOU  
2222 PONCE DE LEON BLVD.  
PENTHOUSE SUITE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

RODON, MARY LOU  
2222 PONCE DE LEON BLVD.  
PENTHOUSE SUITE  
CORAL GABLES, FL 33134 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: MARY LOU RODON

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MENICUCCI, ANGELO  
Address: 2222 PONCE DE LEON BLVD., PENTHOUSE SUITE  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: MENICUCCI, DINO  
Address: 2222 PONCE DE LEON BLVD., PENTHOUSE SUITE  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: MENICUCCI, RAFAEL  
Address: 2222 PONCE DE LEON BLVD., PENTHOUSE SUITE  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: MENICUCCI, LUIS REYNALDO  
Address: 2222 PONCE DE LEON BLVD., PENTHOUSE SUITE  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

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

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

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: ANGELO MENICUCCI

MGRM

04/30/2008

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