

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071913

FILED
Apr 17, 2009
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 (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

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

04/17/2009

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