

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108083

Entity Name: X L THINKING, INC.

FILED  
Aug 23, 2005  
Secretary of State

## Current Principal Place of Business:

10981 NW 59 STREET  
MIAMI, FL 33178

## New Principal Place of Business:

2000 NW 89 PLACE  
114  
MIAMI, FL 3317 2

## Current Mailing Address:

10981 NW 59 STREET  
MIAMI, FL 33178

## New Mailing Address:

PO BOX 521233  
MIAMI, FL 33152

FEI Number: 52-2384369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WALKER, MONEQUE S ESQ.  
8260 WEST FLAGLER STREET  
SUITE 1E  
MIAMI, FL 33144 US

## Name and Address of New Registered Agent:

ANGELA, SALMON K MRS  
10981 NW 59 ST  
MIAMI, FL 33178 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: ANGELA SALMON

08/23/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: SALMON, ANGELA  
Address: 6743 NW 109TH AVENUE  
City-St-Zip: MIAMI, FL 33178

Title: SV (X) Delete  
Name: SALMON, ANGELA  
Address: 6743 NW 109TH AVENUE  
City-St-Zip: MIAMI, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: SALMON, ANGELA  
Address: 10981 NW 59 ST  
City-St-Zip: MIAMI, FL 33178

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

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA SALMON

MRS

08/23/2005

Electronic Signature of Signing Officer or Director

Date