2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State
05-02-2006 90029 012 ****50.00

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1. Entity Name
EXCEL.COM, LLC

Principal Place of Business	Mailing Address
100 S. BISCAYNE BLVD, SUITE 1100 MIAMI, FL 33131	PO BOX 012949 MIAMI, FL 33101

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

02152006 Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1039098 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JEROME HULLO 100 S. BISCAYNE BLVD. SUTIE 1100 MIAMI, FL 33131	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	☐ Delete	TITLE	MGRM	☐ Change ☑ Addition
NAME	HOLLO, TIBOR		NAME	VILLA MAGNA HOLDING, LTD	
STREET ADDRESS	100 S. BISCAYNE BLVD., SUITE 1100		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	100 S. BISCAYNE BLVD, MIAMI 33131	
TITLE	MGR	☐ Delete	TITLE	MGR	☐ Change ☑ Addition
NAME	HOLLO, WAYNE		NAME	JEROME HOLLO	
STREET ADDRESS	100 S. BISCAYNE BLVD., SUITE 1100		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP	100 S. BISCAYNE BLVD, MIAMI 33131	
TITLE		☐ Delete	TITLE	MGR	☐ Change ☑ Addition
NAME			NAME	PHILIP DAMAN	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP	100 S. BISCAYNE BLVD MIAMI 33131	
TITLE		☐ Delete	TITLE	MGR	☐ Change ☑ Addition
NAME			NAME	BRUCE KASSMAN	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP	100 S. BISCAYNE BLVD, MIAMI 33131	
TITLE		☐ Delete	TITLE	MGR	☐ Change ☑ Addition
NAME			NAME	LEONARD KATZ	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP	100 S. BISCAYNE BLVD, MIAMI 33131	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 4/13/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #