## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000754

Entity Name: EXCELAG CORP.

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 521	331567840 U	6			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 521	ENDALL DR. 331567840 U	6			
FEI Number:	65-1068759	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
7300 N. KENDALL DR. SUITE 521 MIAMI, FL 331567840 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:					
	Electron	c Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () CEPEDA, JORG 7200 SW 109 T MIAMI, FL 3315	ERRACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DS () CEPEDA, NELY 7200 SW 109 T MIAMI, FL 3315	ERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () MILES, DAVID L 1307 SALEM LA CHAPEL HILL, N	NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS () AMOROS, ALBE 9130 S. DADEL MIAMI, FL 3315	AND BLVD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 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: NELLY VIOLETA CEPEDA DS 01/06/2009