


**FILED**  
**Aug 20, 2007 8:00 am**  
**Secretary of State**

07-18-2007 90045 027 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

<b>DOCUMENT # J59407</b>			
1. Entity Name EXQUISITE SERVICES, INC.			
Principal Place of Business 204 EAST GARDEN STREET #135 PENSACOLA, FL 32501 US		Mailing Address POST OFFICE BOX 13142 PENSACOLA, FL 32591 US	
2. Principal Place of Business - No P.O. Box # 200 Pensacola Beach Rd # B1 Suite, Apt. #, etc.		3. Mailing Address SAME AS #135 BOX 2	
City & State Gulf Breeze FL		City & State FL 32561	
4. FEI Number 59-2829537		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PFAFF, SUZAN H PVSP 200 PENSACOLA BEACH ROAD UNIT B-1 GULF BREEZE, FL 32561		7. Name and Address of New Registered Agent	
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: _____	
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSVP SUZAN H. PFAFF 200 PENSACOLA BEACH ROAD #B-1 GULF BREEZE, FL 32561 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Suzan H. Pfaff</u>		Date: <u>7/11/07</u> 850-434-5070	

*Suzan H. Pfaff*

ATTACHMENT

66021075

#J59407

EXQUISITE SERVICES INC

SUZAN H. PFAFF

200 Pensacola Beach Road # B-1

Gulf Breeze, Florida 32561

Phone: 850-572-4482

Fax: 850-932-6191

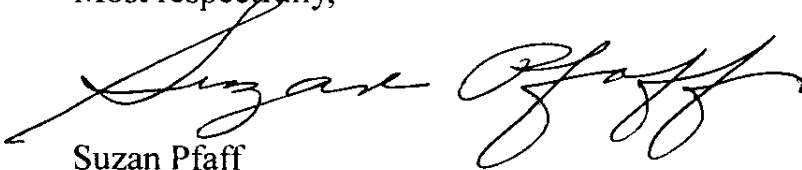
August 14<sup>th</sup>, 2007

Florida Department of State  
Division of Corporations

Dear Sir/Madam:

I did not receive the original annual report in January of 2007. I respectfully request the late fee be waived because of not receiving prior notice.

Most respectfully,



Suzan Pfaff  
President