2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037143

Address:

City-St-Zip:

Entity Name: CREDIT REPAIR XPERTS, LLC

1680 NW ST LUCIE WEST BLVD, STE 208

PORT ST LUCIE, FL 34986

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1680 NW ST LUCIE WEST BLVD, STE 208 PORT ST LUCIE, FL 34986 **Current Mailing Address: New Mailing Address:** 1680 NW ST LUCIE WEST BLVD, STE 208 PORT ST LUCIE, FL 34986 FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GENTRY, ANTONIA L 1680 NW ST LUCIE WEST BLVD, STE 208 PORT ST LUCIE, FL 34986 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GENTRY, ANTONIA L Name: Name: Address: 1680 NW ST LUCIE WEST BLVD, STE 208 Address: City-St-Zip: PORT ST LUCIE, FL 34986 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BEUTEL, DEBORAH 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: ANTONIA L GENTRY MGRM 05/01/2007