

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098736

Entity Name: CULTURE XCLUSIVE, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

3095 NE 190ST, #302
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 800741
AVENTURA, FL 33280

New Mailing Address:

FEI Number: 04-3845423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, SHANTELL
3095 NE 190ST, #302
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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:

Title: PCEO () Delete
Name: HAYNES, SHANTELL
Address: 3095 NE 190ST, #302
City-St-Zip: AVENTURA, FL 33180

Title: VP (X) Delete
Name: PALMER, TORRIN S JR.
Address: 3095 NE 190ST, #302
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

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

Title: () Change () Addition
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: S.HAYNES

PCEO

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date