2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127438

Entity Name: EXCEL LOSS MITIGATION SERVICES LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18246 COLLINS AVENUE SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

18246 COLLINS AVENUE SUNNY ISLES BEACH, FL 33160

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EGDYSZ, MARINA GLEIZER, JORGE 18246 COLLINS AVE 18246 COLLINS AVE

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 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: JORGE GLEIZER 04/15/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:EGDYSZ, MARINAName:GLEIZER, JORGEAddress:18246 COLLINS AVENUEAddress:18246 COLLINS AVENUECity-St-Zip:SUNNY ISLES BEACH, FL 33160City-St-Zip:SUNNY ISLES BEACH, FL 33160

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: JORGE GLEIZER MGRM 04/15/2009