2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050105

Entity Name: XCLUSIVE ENTERPRISE SERVICES, LLC

FILED Feb 06, 2009 Secretary of State

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

8004 N.W. 154 STREET, SUITE 451 8004 NW 154 ST MIAMI LAKES, FL 33016

451

MIAMI LAKES, FL 33016

Current Mailing Address: New Mailing Address:

8004 N.W. 154 STREET, SUITE 451 8004 NW 154 ST

MIAMI LAKES, FL 33016

MIAMI LAKES, FL 33016

FEI Number: 90-0384171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOPEZ, MILAGROS C LOPEZ, MILAGROS C 8004 N.W. 154 STREET, SUITE 451 8004 NW 154 ST

MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 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: MILAGROS LOPEZ 02/06/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

LOPEZ, MILAGROS C Name: Name: LOPEZ, MILAGROS C Address: 8004 N.W. 154 STREET, SUITE 451 Address: 8004 NW 154 ST City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: MIAMI LAKES, FL 33016

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

Name: FRANCO, CARIDAD A Name: Address: 8004 N.W. 154 STREET, SUITE 451 Address: City-St-Zip: MIAMI LAKES, FL 33016 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: MILAGROS LOPEZ 02/06/2009