

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000039708

FILED
Jan 05, 2007
Secretary of State

Entity Name: XL SERVICES CORP.

Current Principal Place of Business:

11153 MODEL CIRCLE WEST
BOCA RATON, FL 33428

New Principal Place of Business:

18144 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498

Current Mailing Address:

11153 MODEL CIRCLE WEST
BOCA RATON, FL 33428

New Mailing Address:

18144 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498

FEI Number: 75-3042892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTEIRO, DIOGENES
1153 MODEL CIRCLE WEST
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

MONTEIRO, DIOGENES
18144 CLEAR BROOK CIRCLE
BOCA RATON, FL 33498 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: DIOGENES MONTEIRO

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTEIRO, DIOGENES
Address: 11153 MODEL CIR W.
City-St-Zip: BOCA RATON, FL 334285804

Title: VPD () Delete
Name: ALVES DOS SANTOS, JANIE KELLY
Address: 11153 MODEL CIR W
City-St-Zip: BOCA RATON, FL 334285804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONTEIRO, DIOGENES
Address: 18144 CLEAR BROOK CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: VPD (X) Change () Addition
Name: ALVES DOS SANTOS, JANIE KELLY
Address: 18144 CLEAR BROOK CIRCLE
City-St-Zip: BOCA RATON, FL 33498

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIOGENES MONTEIRO

PD

01/05/2007

Electronic Signature of Signing Officer or Director

Date