## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000044889

Entity Name: XENEIZES, INC.

FILED Aug 04, 2009 Secretary of State

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

1853 N.E MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179 US

Current Mailing Address: New Mailing Address:

1853 N.E MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179 US

FEI Number: 32-0073267 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:

BARBOZA-CEBALLOS, ROMINA BARBOZA, ROMINA I P
1853 N.E MIAMI GARDENS DRIVE
NORTH MIAMI BEACH, FL 33179 US

BARBOZA, ROMINA I P
1853 N.E MIAMI GARDENS DRIVE
NORTH MIAMI BEACH, FL 33179 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: ROMINA BARBOZA 08/04/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BARBOZA-CEBALLOS, ROMINA
 Name:
 BARBOZA, ROMINA I P

 Address:
 18198 N.W 61 COURT
 Address:
 18198 N.W 61 COURT

 City-St-Zip:
 MIAMI LAKES, FL 33015 US
 City-St-Zip:
 MIAMI LAKES, FL 33015 US

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BARBOZA, ROMINA
 Name:

 Address:
 18198 NW 61 COURT
 Address:

 City-St-Zip:
 MIAMI LAKES, FL 33015
 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 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: ROMINA BARBOZA P 08/04/2009