2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P03000094037

Entity Name: XCLUSIVE DELIVERY SERVICES, CORP.

Current Principal Place of Business:

7817 WEST 36 AVE.
APT. 202
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

7817 WEST 36 AVE.
APT. 202
HIALEAH, FL 33018

New Mailing Address:

3492 WEST 84TH STREET
BAY #108
HIALEAH, FL 33018

FEI Number: 51-0480206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GANDARILLA, RUBEN JR
7817 WEST 36 AVE.
APT. 202
HIALEAH, FL 33018

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GANDARILLA, RUBEN JR
Address: 7817 WEST 36 AVE.
City-St-Zip: HIALEAH, FL 33018

Title: VD ( ) Delete
Name: VALDES, MILDRED
Address: 7817 WEST 36 AVE.
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: RUBEN GANDARILLA JR. PD 04/26/2004

Electronic Signature of Signing Officer or Director — Date