

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2007 8:00 am
Secretary of State

05-08-2007 90007 009 ***150.00

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1. Entity Name
EXCLUSIVE FILES, INC



Principal Place of Business
1330 SW 31 AVENUE
MIAMI, FL 33126

Mailing Address
1330 SW 31 AVENUE
MIAMI, FL 33145

40107894



03142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1757274

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~MAYORGA DOUGLAS SR~~ Amanda Perez
~~450 NW 86 PLACE~~ 1330 S W 31st. Ave.
~~MIAMI, FL 33126~~ Miami, FL 33145

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Amanda Perez

03/15/07

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PEREZ, AMANDA MS
STREET ADDRESS	1330 SW 31 AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	VP
NAME	PEREZ, ARMANDO MR
STREET ADDRESS	1330 SW 31 AVENUE
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	SD
NAME	RODRIGUEZ, CAROLINA
STREET ADDRESS	1330 SW 31st. Ave.
CITY-ST-ZIP	Miami, FL 33145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Amanda Perez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/15/07

Date

Daytime Phone #