

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000055296

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: EXCELSIOR FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

750 E SAMPLE RD BLDG 3 BAY 5  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

## Current Mailing Address:

750 E SAMPLE RD BLDG 3 BAY 5  
POMPANO BEACH, FL 33064

## New Mailing Address:

FEI Number: 20-2682786

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ETIENNE, DAVID V  
161 NE 30TH CT  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

BELLUNE, ELIE P  
20462 NW 18 AVE  
MIAMI GARDENS, FL 33056 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: ELIE BELLUNE

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BELLUNE, ELIE P  
Address: 20462 NW 18 AVE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: V (X) Delete  
Name: ETIENNE, DAVID V  
Address: 161 NE 30 CT  
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Delete  
Name: MORTIMER, JEANNIE S  
Address: 490 NW 89 ST  
City-St-Zip: EL PORTAL, FL 33150

Title: T (X) Delete  
Name: MAITRE, ANGIE T  
Address: 161 NE 30 CT  
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Delete  
Name: ETIENNE, JEAN S  
Address: 161 NE 30TH CT  
City-St-Zip: POMPANO BEACH, FL 33064

Title: S (X) Delete  
Name: NICOLAS, CLIFFORD S  
Address: 161 NE 30 CT  
City-St-Zip: POMPANO BEACH, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ELLIE BELLUNE

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date