2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P05000077099 1. Entity Name 04-23-2007 90070 028 ***158.75 EXCELSIOR UNITED, CORP. Principal Place of Business Mailing Address 22683 SW 65TH TERR 22683 SW 65TH TERR **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State Applied For City & State 4. FEI Number 32-0152261 3ame Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TOUSSAINT, ATTENDIEU 22683 SW 65TH TERR Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** City Zip Code 8. 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete ME Change DXI Addition PETIT FRERE, THERCUIS 2800 NW 56 AVE APT 203 TOUSSAINT, ATTENDIEU NAME 22683 SW 65TH TERR STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP **BOCA RATON FL 33428** CITY - ST- 7IP TITLE ☐ Defete **Addition** TITLE [] Change SAMAR, HENRY NAME ROLIN; JOSEPH NAME Ť, 1332 NW 8TH AVE 1409 SE 8 AVE 102 B STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 DEERFIELD BEACH FL 33441 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change **Addition** D : L ST JEAN, JOHNNY NAME NAME ROSE, JOSEPH 4851 NW 20TH STREET STREET ADDRESS STREET ADDRESS **370 NW 37 STREET** POMPANO BEACH FL 33064 LAUDERHILL FL 33313 CITY-ST ZIP CITY-ST-ZIP TITLE Delete TITLE ■ Addition ☐ Change SAMAR, MARC NAME NAME 200 NE 38TH STREET APT 9 STREET ADDRESS STREET ADDRESS OAKLAND PARK FL 33334 CITY-ST-ZIP CRY-ST-7tP ☐ Delete Change Addition TITLE ARISTIDE, RUTH NAME NAME 1270 SW 11TH AVE #B STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL 33344 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete MILE ☐ Change Addition PHILOGENE, ROLAND NAME NAME 826 SW 50TH AVE STREET ADDRESS STREET ADDRESS MARGATE FL 33068 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

OF SIGNING OFFICER OR DIRECTOR

FILED