

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102341

FILED
May 01, 2007
Secretary of State

Entity Name: EXCLUSIVE CONCEPT, INC.

Current Principal Place of Business:

4731 SW 51 ST
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4731 SW 51 ST
DAVIE, FL 33314

New Mailing Address:

FEI Number: 20-3214343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIN, ONEL
9354 NW 24TH PLACE
PEMBROKE PINES, FL 33024 US

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

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:

Title: P () Delete
Name: MARIN, ONEL
Address: 4731 SW 51 ST
City-St-Zip: DAVIE, FL 33314

Title: VP () Delete
Name: MARIN, OTNIEL E
Address: 4731 SW 51 ST
City-St-Zip: DAVIE, FL 33314

Title: T (X) Delete
Name: MARIN, OTTO
Address: 4731 SW 51ST
City-St-Zip: DAVIE, FL 33314

Title: S (X) Delete
Name: MARIN, OSIEL
Address: 4731 SW 51ST
City-St-Zip: DAVIE, FL 33314

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:

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: ONEL MARIN

P

05/01/2007

Electronic Signature of Signing Officer or Director

_____ Date