2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021721

FILED Aug 18, 2007 Secretary of State

Entity Name: EXCLUSIVE CONCIERGE CONCEPTS INC).		
Current Principal Place of Business:	New Principal Plac	e of Business:	
370 NORTHEAST 147TH TERRACE NORTH MIAMI, FL 33161			
Current Mailing Address:	New Mailing Addre	New Mailing Address:	
370 NORTHEAST 147TH TERRACE NORTH MIAMI, FL 33161	PO BOX 612312 NORTH MIAMI, FL	PO BOX 612312 NORTH MIAMI, FL 33261	
FEI Number: 20-4316192 FEI Number Applied For ()	I Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
BROOKINS, DENETRYA S 370 NORTHEAST 147TH TERRACE NORTH MIAMI, FL 33161 US			
The above named entity submits this statement for the purpoin the State of Florida.	se of changing its registe	red office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not recellection Campaign Financing Trust Fund Contribution ().	eive the prior notice.		
OFFICERS AND DIRECTORS:	CERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI		
Title: P () Delete Name: BROOKINS, DENETRYA S Address: 370 NORTHEAST 147TH TERRACE City-St-Zip: NORTH MIAMI, FL 33161	Address: 370 NOR	(X) Change()Addition IS, DENETRYA S THEAST 147TH TERRACE IIAMI, FL 33161 US	
Title: () Delete Name: Address: City-St-Zip:	Address: 370 NOR	() Change (X) Addition IS, ERNEST L THEAST 147 TERRACE IIAMI, FL 33161 US	
Title: () Delete Name: Address: City-St-Zip:	Address: 370 NOR	() Change (X) Addition S, HARRIET D THEAST 147 TERRACE IIAMI, FL 33161 US	

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: DENETRYA BROOKINS Ρ 08/18/2007