

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000053282

Entity Name: XSERVICES, INC.

FILED
Jan 03, 2011
Secretary of State

Current Principal Place of Business:

6955 N.W. 77TH AVE.
305
MIAMI, FL 33166

New Principal Place of Business:

8180 N.W. 36TH STREET
321
MIAMI, FL 33166

Current Mailing Address:

6955 N.W. 77TH AVE.
305
MIAMI, FL 33166

New Mailing Address:

8180 N.W. 36TH STREET
321
MIAMI, FL 33166

FEI Number: 27-0413717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARES, MANUEL J SR
6955 N.W. 77TH AVE.
305
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

PARES, HERCILIA
8180 N.W. 36TH STREET
321
MIAMI, FL 33166 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: HERCILIA PARES

01/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: PARES, HERCILIA
Address: 8180 N.W. 36TH STREET, SUITE #321
City-St-Zip: MIAMI, FL 33166

Title: VP
Name: PARES, LUIS A
Address: 8180 N.W. 36TH STREET, SUITE #321
City-St-Zip: MIAMI, FL 33166

Title: SEC
Name: PARES, HERCILIA
Address: 8180 N.W. 36TH STREET, SUITE #321
City-St-Zip: MIAMI, FL 33166

Title: TREA
Name: PARES, LUIS A
Address: 8180 N.W. 36TH STREET, SUITE #321
City-St-Zip: MIAMI, FL 33166

I hereby 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 all other like empowered.

SIGNATURE: HERCILIA PARES

PRES

01/03/2011

Electronic Signature of Signing Officer or Director

Date