## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L31909

TEITELBAUM, ORLI

MIAMI BEACH, FL 33140

777 ARTHUR GODFREY RD, #400

Name:

Address:

City-St-Zip:

Entity Name: VAIL VALLEY SALVAGE CORPORATION

FILED Feb 20, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
% MARK RUBIN 777 ARTHUR GODFREY RD, 4TH FLOOR MIAMI BEACH, FL 33140				MARK RUBIN 777 ARTHUR GODFREY RD, 4TH FLOOR MIAMI BEACH, FL 33140	
Current Mailing Address:				New Mailing Address:	
% MARK RUBIN 777 ARTHUR GODFREY RD, 4TH FLOOR MIAMI BEACH, FL 33140				MARK RUBIN 777 ARTHUR GODFREY RD, 4TH FLOOR MIAMI BEACH, FL 33140	
FEI Number:	65-0156716	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
4TH FLOO MIAMI BEA	UR GODFRE` NR NCH, FL 3314	0 US			
	named entity of Florida.	submits this statement for the p	ourpose o	of changing its registere	ed office or registered agent, or both,
SIGNATUF	RE:				
Electronic Signature of Registered Agent				Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( RUBIN, MARK, 777 ARTHUR ( MIAMI BEACH,	ODFREY RD		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( BALOGH, ROB 777 ARTHUR ( MIAMI BEACH,	SODFREY RD		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition
Title:	COO (	) Delete		Title <sup>.</sup>	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ORLI TEITELBAUM COO 02/20/2007