

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113718

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: VICTORIA WORLD WIDE BUSINESS CONNECTIONS, INC.

## Current Principal Place of Business:

15050 N.W. 79 CT  
104  
MIAMI LAKES, FL 33016

## New Principal Place of Business:

11900 BISCAYNE BLVD  
301  
NORTH MIAMI, FL 33181

## Current Mailing Address:

15050 N.W. 79 CT  
104  
MIAMI LAKES, FL 33016

## New Mailing Address:

11900 BISCAYNE BLVD  
301  
NORTH MIAMI, FL 33181

FEI Number: 22-3850390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIPSON, SAUL B CPA  
1515 UNIVERSITY DRIVE  
SUITE 222  
CORAL SPRINGS, FL 33071 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: OSPINA, ELSA V  
Address: 15050 N.W. 79 CT SUITE 104  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP,S ( ) Delete  
Name: OSPINA, SARA I  
Address: 15050 N.W. 79 CT SUITE 104  
City-St-Zip: MIAMI LAKES, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: OSPINA, ELSA V  
Address: 11900 BISCAYNE BLVD SUITE 301  
City-St-Zip: NORTH MIAMI, FL 33181

Title: VP,S (X) Change ( ) Addition  
Name: OSPINA, SARA I  
Address: 11900 BISCAYNE BLVD SUITE 301  
City-St-Zip: NORTH MIAMI, FL 33181

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: SARA OSPINA

VP.S

01/09/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date