

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
May 09, 2007
Secretary of State**

DOCUMENT# P05000165518

Entity Name: VICTORIA CONSULTANTS INC.

Current Principal Place of Business:

672 SW DWIGHT AVENUE
PORT ST LUCIE, FL 34983 US

New Principal Place of Business:

3320 SW BLUE COURT
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

672 SW DWIGHT AVENUE
PORT ST LUCIE, FL 34983 US

New Mailing Address:

3320 SW BLUE COURT
PORT ST LUCIE, FL 34953 US

FEI Number: 20-4183575 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYORGA, AUGUST C
200 NORTH DENNING DRIVE
SUITE 5
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

MAYORGA, AUGUST C
243 W KENNEDY BLVD
SUITE C
ORLANDO, FL 32810 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: AUGUST C MAYORGA 05/09/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JARQUIN, AMPARO
Address: 672 SW DWIGHT AVENUE
City-St-Zip: PORT ST LUCIE, FL 349832434 US

Title: VP () Delete
Name: BURGOS, MARIO I
Address: 672 SW DWIGHT AVENUE
City-St-Zip: PORT ST LUCIE, FL 349832434 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JARQUIN, AMPARO
Address: 3320 SW BLUE COURT
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VP (X) Change () Addition
Name: BURGOS, MARIO I
Address: 3320 SW BLUE COURT
City-St-Zip: PORT ST LUCIE, FL 34953 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: AMPARO JARQUIN P 05/09/2007
Electronic Signature of Signing Officer or Director Date