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: DAVID F ABRAMS

City-State-Zip: FARROCKAWAY NY 11691

Electronic Signature of Signing Officer/Director Detail

2013	FLORIDA	PROFIT	CORPOR	RATION /	ANNUAL	REPORT
-						

DOCUMENT# P08000048029

Entity Name: VILLA PROJECTS, INC.

# **Current Principal Place of Business:**

2210 COACH HOUSE BLVD

ORLANDO, FL 32812

# **Current Mailing Address:**

2210 COACH HOUSE BLVD 7 ORLANDO, FL 32812

### FEI Number: 26-2668399

# Name and Address of Current Registered Agent:

ABRAMS, DAVID 2210 COACH HOUSE BLVD ORLANDO, FL 32812 US

Electronic Signature of Registered Agent CEO Title S ABRAMS, DAVID Name ABRAMS, CLAUDETTE ABRAMS 2210 COACH HOUSE BLVD 6017 ROOSEVELT BLVD Address JACKSONVILLE FL 32244 City-State-Zip: ORLANDO FL 32812 City-State-Zip: Т Title т Name SARAH, WILLS KISHA, SMITH L Address 320 B 42ND ST 2210 COACH HOUSE BLVD FARROCKAWAY NY 11691 City-State-Zip: ORLANDO FL 32812 City-State-Zip: Title СТО СТО ABRAMS, DENNIS Name ABRAMS, ALVIN 320 BEACH 42ND STREET Address 320 B 42ND ST

City-State-Zip:

CEO

FAR ROCKAWAY NY 11691

Certificate of Status Desired: No

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:

Title

Name

Title

Name

Title

Name

Address

Address

Address

#### **Officer/Director Detail :**

# FILED Feb 04, 2013 Secretary of State CC1364906190

Date

02/04/2013

Date