

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 367920

**FILED**  
**Jul 31, 2009**  
**Secretary of State****Entity Name:** V. H. ENTERPRISES, INC.**Current Principal Place of Business:**1000 - 1006 S.W. 1ST STREET  
MIAMI, FL 33130**New Principal Place of Business:****Current Mailing Address:**6505 BLUE LAGOON DRIVE  
SUITE 130  
MIAMI, FL 331266041 US**New Mailing Address:****FEI Number:** 59-1306202      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MARQUEZ & MARCELO-ROBAINA, P.A.  
6505 BLUE LAGOON DRIVE  
SUITE 130  
MIAMI, FL 331266041 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

**OFFICERS AND DIRECTORS:****Title:** P      ( ) Delete  
**Name:** BLANCO, EDDY  
**Address:** 9805 SW 64 STREET  
**City-St-Zip:** MIAMI, FL 331731437**Title:** 1VP      ( ) Delete  
**Name:** CEPERO, JUAN E  
**Address:** 6505 BLUE LAGOON DRIVE-SUITE 130  
**City-St-Zip:** MIAMI, FL 331266041 US**Title:** 2VP      ( ) Delete  
**Name:** BLANCO, DANIEL  
**Address:** 9805 SW 64 ST.  
**City-St-Zip:** MIAMI, FL 331731437**Title:** T      ( ) Delete  
**Name:** BLANCO, MERCEDES  
**Address:** 9805 SW 64 ST.  
**City-St-Zip:** MIAMI, FL 331731437**Title:** D      ( ) Delete  
**Name:** HERNANDEZ, VIRGILIO  
**Address:** 9805 SW 64 ST.  
**City-St-Zip:** MIAMI, FL 331731437**Title:** S      (X) Delete  
**Name:** MARQUEZ, JOSE M  
**Address:** 6505 BLUE LAGOON DRIVE #130  
**City-St-Zip:** MIAMI, FL 331266041 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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: CAMERON GALLOWAY

A

07/31/2009

Electronic Signature of Signing Officer or Director

Date