

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006570

Entity Name: VASO REALTY CORP.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

568 WEST 184TH STREET
NEW YORK, NY 10033

New Principal Place of Business:

Current Mailing Address:

568 WEST 184TH STREET
NEW YORK, NY 10033

New Mailing Address:

FEI Number: 13-4127254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREW SERVICE CORPORATION OF FLORIDA
201 N. FRANKLIN STREET
SUITE 2100
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

TEICHMAN, HARRY
201 N. FRANKLIN STREET
SUITE 2100
TAMPA, FL 33602 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: HARRY TEICHMAN, ESQ.

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: SAVIDIS, LYDIA
Address: 568 WEST 184TH STREET
City-St-Zip: NEW YORK, NY 10033

Title: PT () Delete
Name: SAVIDIS, LYDIA
Address: 568 WEST 184TH STREET
City-St-Zip: NEW YORK, NY 10033

Title: V () Delete
Name: SAVIDIS, MARY
Address: 568 WEST 184TH STREET
City-St-Zip: NEW YORK, NY 10033

Title: S () Delete
Name: SAVIDIS, SYLVIO
Address: 568 WEST 184TH STREET
City-St-Zip: NEW YORK, NY 10033

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:

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: LYDIA SAVIDIS

CHRM

01/05/2009

Electronic Signature of Signing Officer or Director

Date