

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000002852

FILED
Sep 30, 2009
Secretary of State

Entity Name: THE VICTORIA MUTUAL BUILDING SOCIETY

Current Principal Place of Business:

8 -10 DUKE STREET
KINGSTON, JAMAICA,

New Principal Place of Business:

8 -10 DUKE STREET
KINGSTON, JA 00000

Current Mailing Address:

PO BOX 600
KINGSTON 10,

New Mailing Address:

21461 NW 2ND AVENUE
MIAMI GARDENS, FL 33169

FEI Number: 98-0587110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: JIM PERKINS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HUTCHINSON, ROY N
Address: LEWIS STREET, SAVANNA-LA-MAR
City-St-Zip: WESTMORELAND,

Title: C () Delete
Name: PENNICOOK, PAUL
Address: 72 HARBOUR STREET
City-St-Zip: KINGSTON,

Title: PCEO () Delete
Name: POWELL, RICHARD
Address: 73-75 HALF WAY YREE ROAD
City-St-Zip: KINGSTON 10,

Title: V () Delete
Name: REID, HUGH
Address: 8 -10 DUKE STREET
City-St-Zip: KINGSTON,

Title: V () Delete
Name: HANN, NOEL
Address: 8 -10 DUKE STREET
City-St-Zip: KINGSTON,

Title: VS () Delete
Name: FRANCIS-SMELLIE, PAULETTE
Address: 73 -75 HALF WAY YREE ROAD
City-St-Zip: KINGSTON 10,

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: PAULETTE FRANCIS-SMELLIE

V

09/30/2009

Electronic Signature of Signing Officer or Director

Date