## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## Mar 12, 2007 8:00 am Secretary of State **DOCUMENT # H12865** 03-12-2007 90370 032 \*\*\*158.75 1. Entity Name VI-CHEM, INC. Principal Place of Business Mailing Address 7210 NW 77 STREET % IVAN A. GOMEZ, ESQ. MEDLEY, FL 33166 601 BRICKELL KEY DR. SUITE 507 MIAMI, FL 33131 02232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2497660 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent IAG CORPORATE SERVICES, INC. DO NOT WRITE 601 BRICKELL KEY DRIVE **SUITE 507** IN THIS SPACE MIAMI, FL 33131 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. DCEO TITLE NAME CARRILLO, VIRIATO STREET ADDRESS 4110 ALHAMBRA CIRCLE CITY-ST-ZIP CORAL GABLES, FL TITLE CARRILLO, VIRGINIA STREET ADDRESS 4110 ALHAMBRA CIRCLE CITY-ST-ZIP CORAL GABLES, FL TITLE NAME CARRILLO, VIRIATO A STREET ADDRESS 5866 SW 42 ST DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33155 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

FILED