

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H91585 1. Entity Name V.F. 24 HOLDINGS, INC.						FILED 04 FEB 16 PM 4:44 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business BROAD & CASSEL 7777 GLADES RD #300 BOCA RATON, FL 33434 US				Mailing Address BROAD & CASSEL 7777 GLADES RD #300 BOCA RATON, FL 33434 US			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent DEUTCH, JEFFREY BROAD & CASSEL 7777 GLADES RD #300 BOCA RATON, FL 33434				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City			
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.				4. FEI Number 59-2638487			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TVD GATTINGER, FRANKLIN J. 8600 DECARIE BLVD, SUITE 200 TOWN OF MOUNT ROYAL, QC				TITLE NAME STREET ADDRESS CITY-ST-ZIP TV GATTINGER, FRANKLIN J. 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA			
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD POMERANTZ, ALICE 8600 DECARIE BLVD, STE 200 TOWN OF MOUNT ROYAL, QC				TITLE NAME STREET ADDRESS CITY-ST-ZIP 800028960768 02/18/04--01005--001 **5000.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP ASD ESPOSITO, RAPHAEL JR 8600 DECARIE BLVD #200 MT ROYAL, QC, CANADA,				TITLE NAME STREET ADDRESS CITY-ST-ZIP AS ESPOSITO, RAPHAEL JR 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA			
TITLE NAME STREET ADDRESS CITY-ST-ZIP CEOD POMERANTZ, TERRY 8600 DECARIE BLVD #200 MT ROYAL, QC, CANADA,				TITLE NAME STREET ADDRESS CITY-ST-ZIP CEOSD POMERANTZ, TERRY 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA			
TITLE NAME STREET ADDRESS CITY-ST-ZIP S POMERANTZ, TERRY 8600 DECARIE BLVD #200 MT ROYAL, QC, CANADA,				TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.							
SIGNATURE:				R. Esposito			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date 04.01.24 Daytime Phone # 514-341-8600			