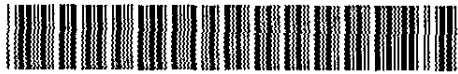
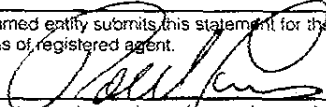
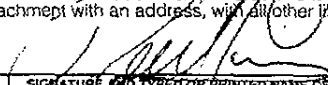


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2004 08:00 AM
Secretary of State

DOCUMENT # L98452 1. Entity Name VIRGINIA LAND HOLDINGS, INC.																																																																																																																													
Principal Place of Business C/O PACIFIC R.E. MGMT. CORP 2600 DOUGLAS ROAD #1004 CORAL GABLES FL 33134 US			Mailing Address C/O PACIFIC R.E. MGMT. CORP 2600 DOUGLAS ROAD #1004 CORAL GABLES FL 33134 US																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																										
City & State			City & State																																																																																																																										
Zip		Country		4. FEI Number 65-0217601 ☐ Applied For ☐ Not Applicable																																																																																																																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																													
6. Name and Address of Current Registered Agent MURAI, WALD, BIONDO, MORENO PA 25 SE 2ND AVE SUITE 900 MIAMI FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																									
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  DATE _____ Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																										
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Date _____ Daytime Phone # _____																																																																																																																													