

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011509

FILED
May 01, 2009
Secretary of State

Entity Name: VICTORIOUS EXPRESSIONS INC.

Current Principal Place of Business:

9635 SW 181 TERR
MIAMI, FL 33157

New Principal Place of Business:

18710 SW 107 AVE
SUITE 23
CUTLER BAY, FL 33157

Current Mailing Address:

9635 SW 181 TERR
MIAMI, FL 33157

New Mailing Address:

18710 SW 107 AVE
SUITE 23
CUTLER BAY, FL 33157

FEI Number: 20-3793768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CODLING, LINFORD
9635 SW 181 TERR
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

CODLING, LINFORD
18710 SW 107 AVE
MIAMI, FL 33157 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: LINFORD CODLING

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CODLING, LINFORD
Address: 9635 SW 181 TERR
City-St-Zip: MIAMI, FL 33157

Title: V () Delete
Name: KNIGHT-BENNETT, PATRICIA
Address: 9635 SW 181 TERR
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CODLING, LINFORD
Address: 18710 SW 107 AVE
City-St-Zip: CUTLER BAY, FL 33157

Title: V (X) Change () Addition
Name: KNIGHT-BENNETT, PATRICIA
Address: 18710 SW 107 AVE
City-St-Zip: CUTLER BAY, FL 33157

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINFORD CODLING

DIR

05/01/2009

Electronic Signature of Signing Officer or Director

Date