

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 10, 2007  
Secretary of State**

DOCUMENT# N98000006436

Entity Name: VICTORY FOR YOUTH CORP.

**Current Principal Place of Business:**

4563 SOUTHWEST 71 AVENUE  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

4563 SOUTHWEST 71 AVENUE  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 65-0874830      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: GONZALEZ, ROLANDO  
Address: 4563 SOUTHWEST 71 AVENUE  
City-St-Zip: MIAMI, FL 33155

Title: BM      ( ) Delete  
Name: DIAZ, MARIA  
Address: 14361 COMMERCE WAY  
City-St-Zip: MIAMI LAKES, FL 33016

Title: P      ( ) Delete  
Name: GONZALEZ, RICARDO  
Address: 4563 SOUTHWEST 71 AVENUE  
City-St-Zip: MIAMI, FL 33155

Title: BM      ( ) Delete  
Name: GREER, FLORENCE  
Address: 8175 NW 12 STREET  
City-St-Zip: MIAMI, FL 33143

Title: D      ( ) Delete  
Name: MARTINEZ, ARMANDO  
Address: 4563 SW 71 AVE  
City-St-Zip: MIAMI, FL 33155

Title: BM      ( ) Delete  
Name: LOPEZ, RAY CPA  
Address: 224 CATALONA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

**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 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: ROLANDO GONZALEZ

D

04/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date