

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 01, 2008
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: P (X) Change () Addition
Name: PENA, IGNACIO I
Address: 4563 SOUTHWEST 71 AVENUE
City-St-Zip: MIAMI, FL 33155

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 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: IGNACIO I PENA

P

10/01/2008

Electronic Signature of Signing Officer or Director

Date