2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P00000065856 1. Entity Name

FILED May 03, 2006 8:00 am Secretary of State 05-03-2006 90234 027 ***150.00

VL KISSIII	MINIEE BUILDING CORP.				03-03-2000 702	.54 027	150.00		
Principal Place of Business 7491 WEST IRLO BRONSON HWY KISSIMMEE, FL 34747		Mailing Address 2419 E. COMMERICAL BLVD. SUITE 100 FT. LAUDERDALE, FL 33308			: Bini 810 880 1800 1800 1800	11			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04262006	Chg-P	CR2E034	1 (11/05)		
City & State		City & State		4. FEI Numb 65-102			_ 	plied For Applicable	
Zip	Country	Zip	Country	5. Certificate	of Status Desired		8.75 Addi ee Required		
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New R	egistered Ag	ent		
				Name					
BLODIG, GREGORY J ESQ. GREENSPOON, MARDER, HIRSCHFIELD, P.A. 100 WEST CYPRESS CREEK RD., SUITE 700			Street Addr	ress (P.O. Box Numb	er is Not Acceptable	•)			
	RDALE, FL 33309								
			City			FL	Zip Code	;	
	named entity submits this statement for ions of registered agent.	r the purpose of changing its r	egistered office or re	gistered agent, or bo	th, in the State of Flo	rida. I am fa	miliar with, a	and accept	
SIGNATURE_	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature for	required when reinstating)	·	DATE			
·									
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig Trust Fund Contri		\$5.00 May Be Added to Fees					
10.	OFFICERS AND	11.	ADDITIONS	CHANGES TO OFF	ICERS AND E	IRECTORS	SIN 11		
TITLE	D	☐ Delete	TITLE			ļ	Change	☐ Addition	
NAME	VERRILLO, JAMES	NAME CIRCL ARRESS							
STREET ADDRESS C!TY-ST-ZIP	2419 E. COMMERICAL BLVD. S FT. LAUDERDALE, FL 33308	STREET ADDRESS CITY-ST-ZIP							
	D	☐ Delete	TITLE				☐ Change	Addition	
TITLE NAME	LAMBERT, DANIEL	LT Delete	NAME						
STREET ADDRESS									
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE			į	☐ Change	☐ Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
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STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP						
CITY-ST-ZIP		П	-			<u></u>	☐ Change	Addition	
TITLE		☐ Delete	TITLE NAME				T CHANGE	CT VOUROIL	
NAME STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trastee 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 entire like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR