

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000101232

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: VICTORY VOTE GENERATORS, CORP.

## Current Principal Place of Business:

8450 SW 83 ST.  
MIAMI, FL 33143

## New Principal Place of Business:

9745 SW 72 STREET,  
SUITE 107  
MIAMI, FL 33173

## Current Mailing Address:

8450 SW 83 ST.  
MIAMI, FL 33143

## New Mailing Address:

9745 SW 72 STREET,  
SUITE 107  
MIAMI, FL 33173

FEI Number: 65-1054564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAZZA-MARTINEZ, TANIA A  
782 NW 42 AVE.  
STE. 638  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

GONCALVES, ORLANDO  
9745 SW 72 STREET  
SUITE 107  
MIAMI, FL 33173 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: ORLANDO GONCALVES

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BELLO, MERCEDES E  
Address: 8450 SW 83 ST.  
City-St-Zip: MIAMI, FL 33143

Title: VD ( ) Delete  
Name: GONCALVES DA SILVA, ORLANDO  
Address: 8450 SW 83 ST.  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: VICENTINI, ALFREDO B  
Address: 8216 SW 81 TERR.  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: GONZALEZ, OSCAR  
Address: 8216 SW 81 TERR.  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: CAJADE, BEATRIZ  
Address: 8483 SW 83 ST.  
City-St-Zip: MIAMI, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BELLO, MERCEDES E  
Address: 9745 SW 72 STREET, SUITE 107  
City-St-Zip: MIAMI, FL 33173

Title: VD (X) Change ( ) Addition  
Name: GONCALVES DA SILVA, ORLANDO  
Address: 9745 SW 72 STREET, SUITE 107  
City-St-Zip: MIAMI, FL 33173

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 Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MERCEDES E. BELLO

PD

04/14/2005

Electronic Signature of Signing Officer or Director

Date