2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P00000103268

VICTORIA & ISABELLA REAL ESTATE MANAGEMENT, INC.

Principal Place of Business

Mailing Address

8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144

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FILED Feb 11, 2008 8:00 am **Secretary of State**

02-11-2008 90056 012 ***150.00



DO NOT WRITE IN THIS SPACE

01092008 No Chg-P	CR2E034 (11/05)		
4. FEI Number		Applied For	
65-1051875		Not Applicable	
E Contificate of Status Decired	□ \$8.75 Additional		

Fee Required

6. Name and Address of Current Registered Agent

MACHADO, JOSE L 8500 SW 8TH STREET SUITE 228

DO NOT WRITE

5. Certificate of Status Desired

MIAMI, FL	. 33144			IN T	THIS SPACE
8. The above the obligation SIGNATURE.	tions of egistered agent.		ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
	Signature typed or printed name of registered agent and title	applicable. (NOTE: Registered	d Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1,2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	I		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS- CITY-ST-ZIP	PVSTM. HERMAN, AGUSTIN 8500 SW 8TH STREET SUITE 228 MJANI, FL 33144 D HERRAN, AGUSTIN 8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144 V HERRAN, EMILIANO -8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HERRAN, DANIEL 8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					

12. I hereby certify that the information supplied with the 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 five 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 trustee 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 other like empowered.

SIGNATURE:

STREET ADDRESS

Date

Daytime Phone #