2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000057693

Entity Name: VICAMASOF CORPORATION

FILED Jan 29, 2006 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

299 ALHAMBRA CIR STE 203

MIAMI, FL 33134

New Mailing Address:

2814 SW 99 COURT MIAMI, FL 33165

2814 SW 99 COURT MIAMI, FL 33165

299 ALHAMBRA CIR STE 203

Current Mailing Address:

MIAMI, FL 33134

FEI Number: 65-1119280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MENENDEZ, ALVARO 299 ALHAMBRA CIR STE 203 MIAMI, FL 33134 US MENENDEZ, ALVARO SR 2814 SW 99 COURT MIAMI, FL 33165 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: ALVARO MENENDEZ SR

01/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MENENDEZ, ALVARO SR.
Address: 299 ALHAMBIA CIR STE 203
City-St-Zip: CORAL GABLES, FL 33134

 Title:
 DT () Delete

 Name:
 MENENDEZ, JOSEFA

 Address:
 299 ALHAMBRA CIR STE 203

 City-St-Zip:
 CORAL GABLES, FL 33134

 Title:
 DS
 (X) Delete

 Name:
 MENENDEZ, ALVARO JR.

 Address:
 299 ALHAMBRA CIR STE 203

 City-St-Zip:
 CORAL GABLES, FL 33134

Title: VP (X) Delete
Name: ELLIOTT, MARIA D

Address: 299 ALHABRA CIR., SUITE 203 City-St-Zip: MIAMI, FL 33134 Title: DPS (X) Change () Addition Name: MENENDEZ, ALVARO SR.
Address: 2814 SW 99 COURT

Address: 2814 SW 99 COUI City-St-Zip: MIAMI, FL 33165

Title: DT (X) Change () Addition

Name: MENENDEZ, JOSEFA Address: 2814 SW 99 COURT City-St-Zip: MIAMI, FL 33165

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALVARO MENENDEZ SR P 01/29/2006