2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 17, 2008 08:00 AM DOCUMENT # P01000088665 **Secretary of State** VICTORIA PROPERTY GROUP, INC. Principal Place of Business Mailing Address PO BOX 430164 5511 S.W. 65TH COURT SOUTH MIAMI, FL 33143 SOUTH MIAMI, FL 33155 CR2E034 (11/05) 01142008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1134972 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MOORE, CARLOS A DO NOT WRITE 5511 SW 65TH COURT SOUTH MIAMI, FL 33155 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title (Lapplicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10, TITLE MOORE, CARLOS A NAME STREET ADDRESS 5511 S.W. 65TH COURT CITY-ST-ZIP SOUTH MIAMI, FL 33155 DILE 000000787583 01/18/08-80005-017 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TATLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 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.

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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR