2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2004
Secretary of State

DOCUMENT# P02000025868

Entity Name: V.I. MANAGEMENT, INC.

Current Principal Place of Business:

P.O. BOX 246443
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 246443
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 02-0570480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPEZ, VICTOR LUIS
451 E 53 ST
HIALEAH, FL 33013

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LOPEZ, VICTOR LUIS
Address: P.O. BOX 246443
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VPD ( ) Delete
Name: VINIEGRA, ISMARI
Address: P.O. BOX 2461143
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: VICTOR L LOPEZ PD 08/31/2004

Electronic Signature of Signing Officer or Director — Date