2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000094237

Entity Name: V & A AMERICAN, CORP.

FILED Apr 30, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

4000 STONESTHROW CT 4912 SW 173RD AVE NAPLES, FL 34109 MIRAMAR, FL 33029

Current Mailing Address: New Mailing Address:

4000 STONESTHROW CT 2430 VANDERBILT BEACH RD. PMB 255 SUIT 108

NAPLES, FL 34109 **NAPLES** MIRAMAR, FL 34109

FEI Number: 36-4505553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

VILLAMIZAR, NICOLAS A VILLAMIZAR, NICOLAS A 4000 STONESTHROW CT 4912 SW 173RD AVE MIRAMAR, FL 33029 US NAPLES, FL 34109

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: NICOLAS VILLAMIZAR 04/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

PSTD () Delete Title: (X) Change () Addition

Title: VILLAMIZAR, NICOLAS A Name: Name: VILLAMIZAR, NICOLAS A

4000 STONESTHROW CT 2430 VANDERBILT BEACH RD. PMB 255 SUIT 108 Address: Address:

City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES EL 34109

Title: VPD Title: VPD (X) Change () Addition () Delete

Name: VILLAMIZAR, MARTHA L Name: VILLAMIZAR, MARTHA L

4000 STONESTHROW CT Address: 2430 VANDERBILT BEACH RD. PMB 255 SUIT 108 Address:

NAPLES, FL 34109 NAPLES, FL 34109 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NICOLAS VILLAMIZAR **PSTD** 04/30/2009