

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000125191

FILED
Nov 09, 2007
Secretary of State

Entity Name: VP CONSULTING SERVICES AMERICA, INC.

Current Principal Place of Business:

2900 N UNIVERSITIES D R
POMPANO BEACH, FL 33065

New Principal Place of Business:

Current Mailing Address:

2900 N UNIVERSITIES D R
1580 SAWGRASS CORP. PKWY., #130
POMPANO BEACH, FL 33065

New Mailing Address:

FEI Number: 20-0356544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONILLA, THOMAS & ASSOCIATES, INC.
4801 SOUTH UNIVERSITY DRIVE
SUITE 263
DAVIE, FL 33328 US

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

OFFICERS AND DIRECTORS:

Title: P, S () Delete
Name: PAZ, VLADIMIR
Address: 1580 SAWGRASS CORP. PKWY., SUITE 130
City-St-Zip: SUNRISE, FL 33323

Title: VP () Delete
Name: GONZALEZ, AVY
Address: 1580 SAWGRASS CORP. PKWY., SUITE 130
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, S (X) Change () Addition
Name: LLOVERA SALAS, BEATRIZ
Address: 1580 SAWGRASS CORP. PKWY., SUITE 130
City-St-Zip: SUNRISE, FL 33323

Title: VP (X) Change () Addition
Name: AGUILAR, EDGAR
Address: 1580 SAWGRASS CORP. PKWY., SUITE 130
City-St-Zip: SUNRISE, FL 33323

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: BEATRIZ LLOVERA SALAS

P

11/09/2007

Electronic Signature of Signing Officer or Director

Date