2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2006 8:00 am Secretary of State

| DOCUMENT #-P03000134903 1. Entity Name THE VICTOR COMPANY, INC. | | | | | | | 02-21-2006 90018 010 ***150.00 | | | |
|---|-------------------------------------|----------|-------------------------------------|--------------|--|---------------------|--------------------------------|---------------------------|------------------------------|--|
| Principal Place of Business Mailing Address | | | | | | | 1 50070 CL2 | | | |
| 7145 LILAC LANE NAPLES, FL 34120 | | | 7145 LILAC LANE NAPLES, FL 34120 | | | | 60020317 | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 0202200 | 6 Chg-P | CR2E034 (11/05) | 1 | |
| City & State | | (| City & State | | | 4. FEI Nur 56-24 | nber 414668 | 1 | pplied For lot Applicable | |
| Zip | | | Zip Countr | | try | 5. Certific | ate of Status Desired | □ \$8.75 Ac Fee Requir | | |
| 6. Name and Address of Current | | | tered Agent | Nome | 7. Name a | and Address of New | Registered Agent | | | |
| RODRIGUEZ, VICTOR D | | | | | Name | | | | | |
| 7145 LILAC LANE NAPLES, FL 34120 | | | | Street Addre | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| ** | | | | | | | | | | |
| ا موسود در در میشود. در استان از در در این از ا | | | | | -CityZip Code | | | | | |
| 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 | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Trust Fund Contribution. | | | | | | | : | | · | |
| 10. OFFICERS AND | | | D DIRECTORS 11. | | | ADDITIO | NS/CHANGES TO O | FFICERS AND DIRECTO | RS IN 11 | |
| TITLE | P Delete | | | TITL | | | ☐ Change ☐ Addition | | | |
| NAME | RODRIGUEZ, VICTOR D | | | NAM | - 1 | | | 1 | | |
| STREET ADDRESS CITY-ST-ZIP | 7145 LILAC LANE NAPLES, FL 34120 | | STREET ADDRESS CITY-ST-ZIP | | | | | ا م | | |
| TITLE | 17.11 22.0,1 2 0 7 120 | | ☐ Delete | TITL | | | | ☐ Change | ☐ Addition | |
| NAME | | | | NAM | _ | | | | | |
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| TITLE | | | □ Delete | | | | | — ☐ Change | ☐ Addition | |
| NAME STREET ADDRESS | | | | NAM STRE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | -ST-ZIP | | | | | |
| TITLE | | | ☐ Delete | ΤITL | | | | Change | ☐ Addition | |
| NAME | | | | NAM | eet address | | | | | |
| STREET ADDRESS CITY+ST-ZIP | | | | | -ST-ZIP | | | | · | |
| TITLE | | | ☐ Delete | . TITL | E | | | ☐ Change | ☐ Addition | |
| NAME | · | | | : NAM | i i | | | • | | |
| STREET ABBRICOS | | | | | EET ADDRESS | | | | | |
| CITI+31-28F | <u> </u> | | | | | | | | 1-4 | |

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.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTO

14/06 (239) \$25-789