

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90018 014 ***150.00

DOCUMENT # P04000017407

1. Entity Name

V-TWENTY ONE, INC. /or "V-21, Inc"

New Address!!!

New Address!!!

Principal Place of Business

10423 N Kendall Dr. # C108
Miami, FL 33176

Mailing Address

10423 N Kendall Dr. # C108
Miami, FL 33176

2. Principal Place of Business - No P.O. Box #

10423 N Kendall Dr.

Suite, Apt. #, etc.

C-108

City & State

Miami, Florida

Zip

33176

Country

Dade

3. Mailing Address

10423 N Kendall Dr.

Suite, Apt. #, etc.

C-108

City & State

Miami, Florida

Zip

33176

Country

Dade



1st MOORE

CR2E034 (10/07)

4. FEI Number

51-0495942

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEON, VIVIAN G.
7301 N.W. 3RD STREET
MIAMI FL 33126

(old address!)

7. Name and Address of New Registered Agent

Name *LEON, VIVIAN G.*

Street Address (P.O. Box Number is Not Acceptable)
10423 N Kendall Drive,
C-108

City *Miami*

FL

Zip Code
33176

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]

Signature, typed or printed name of registered agent and date of filing.

(NOTE: Registered Agent signature required when reconstituting)

DATE

(3/1/2008)

FILE NOW!!! - FEE IS \$150.00!!!

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LEON, VIVIAN G
STREET ADDRESS 7301 N.W. 3RD STREET
CITY-ST-ZIP MIAMI FL 33126

*old address!!!
change Address*

TITLE VPS
NAME SHARROUF, SULEIMAN
STREET ADDRESS 6801 S.W. 88 STREET, #1
CITY-ST-ZIP MIAMI FL 33156

*old address!!!
only*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *PD*
NAME *LEON, VIVIAN G.*
STREET ADDRESS *10423 N Kendall Drive, #C108*
CITY-ST-ZIP *Miami, FL 33176*

TITLE *VPS*
NAME *Sharrouf, Suleiman*
STREET ADDRESS *10423 N Kendall Drive, #C108*
CITY-ST-ZIP *Miami, FL 33176*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*(3/1/08) (786) 663-4397 (Office)
(305) 412-1965 (FAX)*