## 104000018530

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	

Office Use Only



800046854028

OS FEB 23 AM 10: 42
SECRETARY OF SURIE
SECRETARY OF SURIE

PAch9 PXB0

## **COVER LETTER**

Division of	of Corporations		
SUBJECT: Victo	oire, Inc.		
00D0EC1	(Name o	f corporation)	
DOCUMENT N	UMBER: P04000018530		
The enclosed State	ement of Change of Registered Of	fice/Agent and fee	e are submitted for filing.
Please return all co	orrespondence concerning this ma	tter to the following	ng:
	Alfanda D. Wanne		
	Alfredo D. Xiques (Name of	contact person)	
	<b>,</b>	, , , , , , , , , , , , , , , , , , ,	
Ga	arcia & Baloyra		
		Company)	
:	2950 SW 27th Avenue, Suite 300		
_	(A	ddress)	
	Miami, Florida 33133		
		and zip code)	
For further inform	ation concerning this matter, pleas	e call:	
Alfredo D. Xiques		at (305	358-4800
(Na	ame of contact person)	(Area co	de & daytime telephone number)
Enclosed is a \$35.0	00 check made payable to the Dep	artment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divis 409 E	et Address: Indiment Section Ition of Corporations E. Gaines Street hassee, FL 32399

CR2E045(6/04)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation organi					
	er to change its registered office or registe	rea agent, or voin, in the State of Florida.				
	the corporation: Victoire, Inc.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
2. The principal	office address: 2950 SW 27th Avenue, 5	Suite 300, Miami, Florida 33133				
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification: 1/26/2004	Document number: P04000018530				
	d street address of the current registered agreement of State:	ent and registered office on file with the				
	Stewart A. Merkin, Esq.					
	444 Brickell Avenue, Suite 300	FEE OF T				
	Miami, Florida 33131	18 B 23				
6. The name and (if changed):	d street address of the new registered agent	t (if changed) and /or registered office				
	Eduardo J. Garcia, Esq.	2 5				
	2950 SW 27th Avenue, Suite 300					
	(P.O. Box NOT acceptable)					
	Miami, Florida 33133					
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its registered agent,				
Such change wanthorized by	as authorized by resolution duly adopted be board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.				
(Signif	as attorney in but his sydy soffer, his.	Alfredo Xiques as attorney in fact for Sydney Saffa/ (Printed or Typed name and title)				
I further garea i	the appointment as registered agent and to comply with the provisions of all statud I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the				
	vojbja	2/14/2005				
(Sig	gnature of Registered Agent)	(Date)				
If signing on be	half of an entity:					
T)	yped or Printed Name)					

\* \* \* FILING FEE: \$35.00 \* \* \*