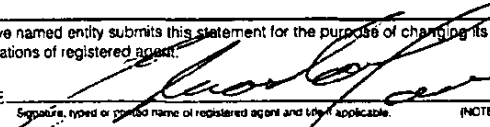
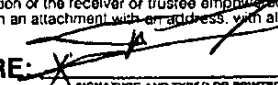


2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/4

FILED
Jun 08, 2005 8:00 am
Secretary of State

05-04-2005 90161 017 ***150.00

DOCUMENT # P04000018530			
1. Entity Name VICTOIRE, INC.			
Principal Place of Business 444 BRICKELL AVENUE SUITE 300 MIAMI, FL 33131		Mailing Address 444 BRICKELL AVENUE SUITE 300 MIAMI, FL 33131	
2. Principal Place of Business 2950 SW 27 Avenue		3. Mailing Address 2950 SW 27 Avenue	
Suite, Apt. #, etc. Suite 300		Suite, Apt. #, etc. 300	
City & State Miami FL		City & State Miami FL	
Zip 33133	Country USA	Zip 33133	Country USA
4. FEI Number 20-2920818		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERKIN, STEWART A ESQ. 444 BRICKELL AVENUE SUITE 300 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name - Eduardo J. Garcia Street Address (P.O. Box Number is Not Acceptable) 2950 SW 27 Avenue Suite 300 City Miami FL Zip Code 33133	
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, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)		Eduardo J Garcia 4/28/05 DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
		Sydney E. Saffar 2950 SW 27 Avenue, Suite 300 Miami, FL 33133	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
		Evelyn Quivault EP Saffar 2950 SW 27 Ave., Suite 300 Miami, FL 33133	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
		Maurice Frank Saffar 2950 SW 27 Ave., Suite 300 Miami, FL 33133	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 SIGNING OFFICER OR DIRECTOR		Sydney E. Saffar 4/28/05 DATE Daytime Phone #	