

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123368

FILED  
Mar 21, 2007  
Secretary of State

Entity Name: 3 VL INVESTMENTS & SERVICES, INC.

## Current Principal Place of Business:

12550 BISCAYNE BOULEVARD  
SUITE # 500  
NORTH MIAMI, FL 33181

## New Principal Place of Business:

## Current Mailing Address:

12550 BISCAYNE BOULEVARD  
SUITE # 500  
NORTH MIAMI, FL 33181

## New Mailing Address:

FEI Number: 20-1683654      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CASTILLO, MARIA C  
3400 NE 192ND STREET  
LPH 6  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

CASTILLO, MARIA C  
12550 BISCAYNE BOULEVARD  
SUITE # 500  
NORTH MIAMI, FL 33181 US

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:

03/21/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: VIDAL, PAOLO  
Address: 17021 NORTH BAY ROAD APT. # 922  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V ( ) Delete  
Name: CASTILLO, MARIA C  
Address: 3400 NE 192ND STREET LPH6  
City-St-Zip: AVENTURA, FL 33180

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: VIDAL, PAOLO  
Address: 12550 BISCAYNE BOULEVARD SUITE # 500  
City-St-Zip: NORTH MIAMI, FL 33181

Title: V (X) Change ( ) Addition  
Name: CASTILLO, MARIA C  
Address: 12550 BISCAYNE BOULEVARD SUITE # 500  
City-St-Zip: NORTH MIAMI, FL 33181

Title: S ( ) Change (X) Addition  
Name: CASTILLO, MARCELA P  
Address: 12550 BISCAYNE BOULEVARD SUITE # 500  
City-St-Zip: NORTH MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the 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: PAOLO VIDAL

DPS

03/21/2007

Electronic Signature of Signing Officer or Director

Date