2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000123587

Entity Name: VTI OF SOUTH FLORIDA, INC.

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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600 NORTH CONGRESS AVENUE 601 NORTH CONGRESS AVENUE SUITE 140 SUITE 109

DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445

Current Mailing Address: New Mailing Address:

600 NORTH CONGRESS AVENUE 601 NORTH CONGRESS AVENUE SUITE 140 SUITE 109
DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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: BRUCE

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: GIRARD, RAPHAEL Name: GIRARD, RAPHAEL

Address: 600 NORTH CONGRESS AVENUE SUITE 140 Address: 601 NORTH CONGRESS AVENUE SUITE 109

City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445

Title: () Delete Title: SEC () Change (X) Addition

Name: Name: GIRARD, MARIETTE

Address: Address: 601 NORTH CONGRESS AVE SUITE 109

City-St-Zip: City-St-Zip: DELRAY BEACH, FL 33445

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: RAPHAEL GIRARD D 02/07/2006