

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000167887

Entity Name: VIA, INC.

FILED  
Mar 31, 2009  
Secretary of State

## Current Principal Place of Business:

107 BARTRAM TRAIL NORTH  
SAN MATEO, FL 32187

## New Principal Place of Business:

109 MARISA DR  
ST AUGUSTINE, FL 32086

## Current Mailing Address:

107 BARTRAM TRAIL NORTH  
SAN MATEO, FL 32187

## New Mailing Address:

109 MARISA DR  
ST AUGUSTINE, FL 32086

FEI Number: 20-2058011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABARBANEL, IAN A  
107 BARTRAM TRAIL NORTH  
SAN MATEO, FL 32187 US

## Name and Address of New Registered Agent:

ABARBANEL, IAN A  
109 MARISA DR  
ST AUGUSTINE, FL 32086 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: IAN ABARBANEL

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ABARBANEL, IAN  
Address: 107 BARTRAM TRAIL NORTH  
City-St-Zip: SAN MATEO, FL 32187

Title: VSD ( ) Delete  
Name: ABARBANEL, VIRGINIA  
Address: 107 BARTRAM TRAIL NORTH  
City-St-Zip: SAN MATEO, FL 32187

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ABARBANEL, IAN A  
Address: 109 MARISA DR  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VSD (X) Change ( ) Addition  
Name: ABARBANEL, VIRGINIA A  
Address: 109 MARISA DR  
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify 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: IAN ABARBANEL

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date