2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005455

Entity Name: VINNI CORPORATION

FILED Sep 18, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cilrrent Principal Place of Bliginess	NAW Principal Place of Kilsiness

3201 NW 4TH TERRACE 3400 W HILLSBORO BLVD

77 # 104

POMPANO BEACH, FL 33064 COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

3201 NW 4TH TERRACE 3400 W HILLSBORO BLVD

77 # 104

POMPANO BEACH, FL 33064 COCONUT CREEK, FL 33073

FEI Number: 20-2149856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAX HOUSE CORPORATION 1100 S FEDERAL HWY

DEERFIELD BEACH, FL 33441 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:

Electronic Signature of Registered Agent Date

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

Name: SILVA, MARLI Name: SILVA, MARLI

 Address:
 3201 NW 4TH TERRACE #77
 Address:
 3400 W HILLSBORO BLVD

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:
 COCONUT CREEK, FL 33073

Name: SILVA, JORGE Name: SILVA, JORGE

Address: 3201 NW 4TH TERRACE #77 Address: 3400 W HILLSBORO BLVD
City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: COCONUT CREEK, FL 33073

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: MARLI SILVA PD 09/18/2009