

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020555

Entity Name: VIA VANILLA VISTA, INC.

FILED  
Jun 20, 2009  
Secretary of State

## Current Principal Place of Business:

3970 OAKS CLUBHOUSE DRIVE  
BLDG 78A - APT 402  
POMPANO BEACH, FL 33069

## New Principal Place of Business:

370 CAPRI H  
DELRAY BEACH, FL 33484

## Current Mailing Address:

3970 OAKS CLUBHOUSE DRIVE  
BLDG 78A - APT 402  
POMPANO BEACH, FL 33069

## New Mailing Address:

370 CAPRI H  
DELRAY BEACH, FL 33484

FEI Number: 20-4374702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DONATO, GAIL  
3970 OAKS CLUBHOUSE DRIVE  
BLDG 78A - APT 402  
POMPANO BEACH, FL 33069 US

## Name and Address of New Registered Agent:

DONATO, GAIL  
370 CAPRI H  
DELRAY BEACH, FL 33484 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:

06/20/2009

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:

Title: PD ( ) Delete  
Name: DONATO, GAIL  
Address: 3970 OAKS CLUBHOUSE DRIVE #402  
City-St-Zip: POMPAÑO BEACH, FL 33069 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DONATO, GAIL  
Address: 370 CAPRI H  
City-St-Zip: DELRAY BEACH, FL 33484 US

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: GAIL DONATO

PD

06/20/2009

Electronic Signature of Signing Officer or Director

Date