## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000028539

Entity Name: VMC PROCESSING, INC.

FILED Apr 06, 2009 Secretary of State

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

10201 HAMMOCKS BLVD. SUITE 153-275

14510 S.W. 108 ST. MIAMI, FL 33186

MIAMI, FL 33196

**New Mailing Address:** 

10201 HAMMOCKS BLVD. SUITE 153-275

14510 S.W. 108 ST.

MIAMI, FL 33196 US

**Current Mailing Address:** 

MIAMI, FL 33186 US

FEI Number: 65-0454270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Title:

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KOVAC, BARBARA PRES

10201 HAMMOCKS BLVD. SUITE 153-275 MIAMI, FL 33196 US

14510 S.W. 108 ST.

MIAMI, FL 33186

KOVAC, BARBARA PRES

in the State of Florida.

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: BARBARA KOVAC

04/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Title: PRFS ( ) Delete

Name: KOVAC, BARBARA PRES

10201 HAMMOCKS BLVD. SUITE 153-275 Address:

City-St-Zip: MIAMI, FL 33196 US

Title: SECT () Delete KOVAC, BARBARA SECT Name:

10201 HAMMOCKS BLVD. SUITE 153-275 Address:

MIAMI, FL 33196 US City-St-Zip:

Address:

KOVAC, BARBARA PRES Name: 14510 S.W. 108 ST. City-St-Zip: MIAMI, FL 33186 US

PRFS

Title: (X) Change ( ) Addition

KOVAC, BARBARA SECT Name: Address: 14510 S.W. 108 ST. MIAMI, FL 33186 US City-St-Zip:

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: BARBARA KOVAC **PRES** 04/06/2009