2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000122487

Entity Name: VIRTUAL FLYER NETWORK CORP.

FILED Jan 19, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1391 SABAL TRAIL 8390 W. STATE ROAD 84 WESTON, FL 33327 DAVIE, FL 33324

Current Mailing Address: New Mailing Address:

1391 SABAL TRAIL WESTON, FL 33327

FEI Number: 20-3861785 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:

AGUILAR, LUIS

1391 SABAL TRAIL

WESTON, FL 33327 US

GIMENEZ, LOURDES

1391 SABAL TRAIL

WESTON, FL 33327 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: LOURDES GIMENEZ 01/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD() DeleteTitle:P/D(X) Change () AdditionName:AGUILAR, LUISName:GIMENEZ, LOURDESAddress:1391 SABAL TRAILAddress:1391 SABAL TRAIL

Address: 1391 SABAL TRAIL

City-St-Zip: WESTON, FL 33327 US

City-St-Zip: WESTON, FL 33327 US

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

 Name:
 Name:
 RAMIREZ, HENRY

 Address:
 Address:
 1391 SABAL TRAIL

 City-St-Zip:
 City-St-Zip:
 WESTON, FL 33327

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

 Name:
 Name:
 RAMIREZ, HENRY

 Address:
 Address:
 1391 SABAL TRAIL

 City-St-Zip:
 City-St-Zip:
 WESTON, FL 33327

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: LOURDES GIMENEZ MS. 01/19/2009