2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P06000007374

Entity Name: V G ALUMINUM, CORP.

Current Principal Place of Business:

8105 NW 106 AVENUE
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

8105 NW 106 AVENUE
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 20-4137728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VELASQUEZ, MIGUEL
8105 NW 106 AVENUE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: VELASQUEZ, MIGUEL
Address: 8105 NW 106 AVENUE
City-St-Zip: TAMARAC, FL 33321

Title: VPD ( ) Delete
Name: CLARO, RAMON
Address: 7910 N NOB HILL ROAD # 104
City-St-Zip: TAMARAC, FL 33321

Title: STD ( ) Delete
Name: VELASQUEZ, LUIS
Address: 8105 NW 106 AVENUE
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: VELASQUEZ, CLARA
Address: 8030 NOB HILL ROAD #202
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: VELASQUEZ, MARINA
Address: 8030 NOB HILL ROAD #202
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: VELASQUEZ, MARIA
Address: 8030 NOB HILL ROAD #202
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: MIGUEL VELASQUEZ PD 04/29/2008
Electronic Signature of Signing Officer or Director Date