

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90097 023 ***150.00

DOCUMENT # P07000011363

1. Entity Name
G. VIC MANAGEMENT, INCORPORATED



40079204

Principal Place of Business
**1840 WEST 49TH STREET
726
HIALEAH, FL 33012**

Mailing Address
**1840 WEST 49TH STREET
726
HIALEAH, FL 33012**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04142008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-8352640

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SANTOS-AZIZ, ELISSABETH
2520 WEST 56TH STREET
T-704
HIALEAH, FL 33016**

Name **Elissabeth Santos**

Street Address (P.O. Box Number is Not Acceptable)
1840 W 49TH STREET

Suite 726

City **Hialeah**

FL

Zip Code **33012**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
VICTORIA, GIRALDO
8851 NW 119TH STREET UNIT #5207
HIALEAH GARDENS, FL 33018**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1840 W 49TH STREET SUITE 726
HIALEAH, FL 33012**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DE LA TORRE, JULIA
8851 NW 119TH STREET UNIT # 5207
HIALEAH GARDENS, FL 33018**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**1840 W 49TH STREET SUITE 726
HIALEAH, FL 33012**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
SANTOS - AZIZ, ELISSABETH
2520 WEST 56TH STREET T-704
HIALEAH, FL 33016**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Elissabeth Santos
1840 W 49TH STREET SUITE 726
HIALEAH, FL 33012**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/08

Date

Daytime Phone #