## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000014717

Entity Name: EXPERTOS VSA, INC.

**Current Principal Place of Business:** 

Address:

FILED Aug 12, 2008 Secretary of State

**New Principal Place of Business:** 

10560 MENDOCINO LANE BOCA RATON, FL 33428 LIS **Current Mailing Address: New Mailing Address:** 10560 MENDOCINO LANE BOCA RATON, FL 33428 US FEI Number: 20-8370291 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: SAVAGE, MICHAEL W SAVAGE, MICHAEL W SR 10560 MÉNDOCINO LANE 10560 MÉNDOCINO LANE US US BOCA RATON, FL 33428 BOCA RATON, FL 33428 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: MICHAEL W. SAVAGE SR. 08/12/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition SAVAGE, MICHAEL W SAVAGE, MICHAEL W SR Name: Name: 10560 MENDOCINO LANE 10560 MENDOCINO LANE Address: Address: City-St-Zip: BOCA RATON, FL 33428 US City-St-Zip: BOCA RATON, FL 33428 US

() Delete Title: ( ) Change (X) Addition Title: Name: Name: SAVAGE, BEATRIZ 10560 MENDOCINO LANE Address: Address: BOCA RATON, FL 33428 US City-St-Zip: City-St-Zip: Title: ( ) Change (X) Addition Title: () Delete VM SAVAGE, SUSAN B Name: Name: 10560 MENDOCINO LANE Address Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33428 US Title: () Delete Title: ( ) Change (X) Addition PEREZ, RUTHANN B Name: Name:

City-St-Zip: City-St-Zip: BOCA RATON, FL 33428 US

Title: ( ) Delete Title: VA ( ) Change (X) Addition

 Name:
 SAVAGE, MICHAEL W J R

 Address:
 Address:
 10560 MENDOCINO LANE

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33428 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.

Address:

10560 MENDOCINOON LANE

SIGNATURE: MICHAEL W. SAVAGE SR. P 08/12/2008