

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087754

Entity Name: VICTORIA RE, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1200 BRICKELL AVE, SUITE 700
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1200 BRICKELL AVE, SUITE 700
MIAMI, FL 33131

New Mailing Address:

FEI Number: 74-3234583

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: DPT () Delete
Name: RUIZ DE AZUA L DE G, JAVIER
Address: C/O 1200 BRICKELL AVE, SUITE 700
City-St-Zip: MIAMI, FL 33131 US

Title: VP () Delete
Name: GASULL, DAVID FERNANDO
Address: 1200 BRICKELL AVE, SUITE 700
City-St-Zip: MIAMI, FL 33131 US

Title: VPS () Delete
Name: GONZALEZ BARRERA, JUAN
Address: 1200 BRICKELL AVE, SUITE 700
City-St-Zip: MIAMI, FL 33131 US

Title: AS () Delete
Name: FREYRE, PEDRO
Address: 1200 BRICKELL AVE, SUITE 700
City-St-Zip: MIAMI, FL 33131 US

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:

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: PEDRO FREYRE

AS

04/30/2009

Electronic Signature of Signing Officer or Director

Date