


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 04, 2008 8:00 am**  
**Secretary of State**

08-04-2008 90034 025 \*\*\*150.00

<b>DOCUMENT # P07000094422</b> 1. Entity Name <b>VICTORIO'S FINISHES S &amp; M INC.</b>					
Principal Place of Business <b>1212 N.E. 120 TER BISCAYNE PARK, FL 33161</b>			Mailing Address <b>1212 N.E. 120 TER BISCAYNE PARK, FL 33161</b>		
2. Principal Place of Business - No P.O. Box # <b>1453 Majesty Terr.</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>1453 Majesty Terr.</b> <small>Suite, Apt. #, etc.</small>			
City & State <b>Weston FL</b>		City & State <b>Weston FL</b>		4. FEI Number <b>26-0768762</b>	
Zip <b>33327</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CORDOBA, JUAN 1212 NE 120 TER BISCAYNE PARK, FL 33161</b>				7. Name and Address of New Registered Agent Name <b>Victor Bonilla</b> Street Address (P.O. Box Number is Not Acceptable) <b>1453 Majesty Terr.</b> City <b>Weston</b> <b>FL</b> Zip Code <b>33327</b>	
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: <b>Victor M. Bonilla</b> <b>07/30/2008</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT RESTREPO, RAUL 7401 RALEIGH ST HOLLYWOOD, FL 33024	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP,S BONILLA, VICTOR 1453 MAJESTY TER WESTON, FL 33327	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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 name empowered.					
SIGNATURE: <b>Kevin E. Reston</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>07/30/2008</b> <small>Date</small>		<b>9542426712</b> <small>Daytime Phone #</small>	