

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000038018

FILED
Oct 23, 2009
Secretary of State

Entity Name: VICTORIA'S CORPORATE MANAGEMENT, INC.

Current Principal Place of Business:

6245 POWERLINE ROAD
SUITE 104
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

6245 POWERLINE ROAD
SUITE 104
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

6245 POWERLINE ROAD
SUITE 202
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

6245 POWERLINE ROAD
SUITE 202
FORT LAUDERDALE, FL 33309 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DI SORBO, ALDO
6245 POWERLINE ROAD
SUITE 104
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

DI SORBO, ALDO
6245 POWERLINE ROAD
SUITE 202
FORT LAUDERDALE, FL 33309 US

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: ALDO DISORBO

10/23/2009

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:

Title: P () Delete
Name: DI SORBO, ALDO
Address: 6245 POWERLINE ROAD, SUITE 104
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: VP () Delete
Name: DI SORBO, ANTHONY
Address: 6245 POWERLINE ROAD, SUITE 104
City-St-Zip: FORT LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DI SORBO, ALDO
Address: 6245 POWERLINE ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309 US

Title: VP (X) Change () Addition
Name: DI SORBO, ANTHONY
Address: 6245 POWERLINE ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309 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.

SIGNATURE: ALDO DISORBO

P

10/23/2009

Electronic Signature of Signing Officer or Director

Date