## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000064250

Entity Name: VF HOLLYWOOD OAKS, INC.

POMERANTZ, TERRY

8600 DECARIE BLVD #200

MT ROYAL, QC, CANADA,

Name:

Address:

City-St-Zip:

FILED Jan 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** % BROAD & CASSEL 7777 GLADES RD., STE. 300 BOCA RATON, FL 33434 **New Mailing Address: Current Mailing Address:** % BROAD & CASSEL 7777 GLADES RD., STE. 300 BOCA RATON, FL 33434 FEI Number: 59-3267037 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: DEUTCH, JEFFREY A **BROAD & CASSEL** 7777 GLADES RD., STE. 300 BOCA RATON, FL 33434 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition POMERANTZ, ALICE Name: Name: 8600 DECARIE BLVD, STE 200 Address: Address: City-St-Zip: MOUNT ROAYAL, QC City-St-Zip: Title: Title: () Delete () Change () Addition GATTINGER, FRANK Name: Name: 8600 DECARIE BLVD., STE 200 Address: Address: City-St-Zip: MOUNT ROYAL, QC City-St-Zip: Title: Title: CFO () Delete () Change () Addition POMERANTZ, TERRY Name: Name: 8600 DECARIE BLVD #200 Address: Address: City-St-Zip: MT ROYAL, QC, CANADA, City-St-Zip: Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: TANIA KHOO MISS 01/25/2007