

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000064571

Entity Name: V. ANGEL V., INC.

FILED
Feb 03, 2005
Secretary of State

Current Principal Place of Business:

707 CRANDON BOULEVARD
#207
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

707 CRANDON BOULEVARD
#207
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 65-0862384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENREQUEZ, VANESSA
707 CRANDON BLVD.
207
KEY BISCAYNE, FL 33149 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HENRIQUEZ, MIGUEL
Address: 707 CRANDON BOULEVARD #207
City-St-Zip: KEY BISCAYNE, FL 33149

Title: S () Delete
Name: LOPEZ, MARIA C
Address: 707 CRANDON BLVD 207
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VP () Delete
Name: HENRIDQUEZ, MIQUEL A
Address: 707 CRANDON BLVD 207
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T () Delete
Name: HENRIQUEZ, VIVIANE
Address: 707 CRANDON BLVD 207
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VT () Delete
Name: HENRIQUEZ, VANESSA
Address: 707 CRANDON BLVD 207
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VS () Change (X) Addition
Name: SAMPAYO, MICHAEL
Address: 707 CRANDON BLVD., #207
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL SAMPAYO

VS

02/03/2005

Electronic Signature of Signing Officer or Director

Date