## 2008-FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Apr 28, 2008 08:00 AN Secretary of State DOCUMENT # P06000071041 1. Entity Name VESPA OF HOLLYWOOD INC. Principal Place of Business Mailing Address 4360 PETERS ROAD 4360 PETERS ROAD FT. LAUDERDALE, FL 33317 FT. LAUDERDALE, FL 33317 03182008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-4986997 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE VENIS, HARRY 2455 E SUNRISE BLVD. PHN FT. LAUDERDALE, FL 33304 IN THIS SPACE 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE WARRICK, PETER NAME STREET ADDRESS 4360 PETERS ROAD CITY-ST-ZIP FT. LAUDERDALE, FL 33317 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP thing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information and accurate and that my signature shall have the same legal effect so if mode under a tribute certify that the information 12. I hereby certify that the information supplied and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Daytime Phone #

**SIGNATURE** EAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

indicated on this report or supplemental re-of the corporation or the receiver or trustee

changed, or on ar