

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

7/3/2006-90003-003-\$150.00-\$150.00

112

DOCUMENT # F05000003640

1. Entity Name
VSP INVESTMENTS, INC.



Principal Place of Business
**101 CONVENTION CENTER DR.
SUITE 700
LAS VEGAS NV 89109**

Mailing Address
**101 CONVENTION CENTER DR.
SUITE 700
LAS VEGAS NV 89109**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent
**ESPINEL, SORAYA P
5430 LYONS RD
COCONUT CREEK FL 33073**

FILED
06 SEP 20 PM 2:32
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



1st MOORE CR2E034 (10/05)

4. FEI Number **20-2785964**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution: ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ASNKE, PETER R 324 HIGHLAND AVE PALISADES PARK-NJ 07650 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/27/06 **9069351**
Date Daytime Phone #

K. Eckel SEP 21 2006

2/2

To Whom It May Concern:

September 11, 2006

Reference Number: F05000003640

I am writing you this letter with regard to VSP Investments, Inc. and the late Fee that you are asking me to pay which is \$400.00. I did not receive the postcard renewal notice in the mail, so I am asking if you would please remove the late fee from my account. I did however file my annual profit report with your office and my check for \$150.00 has been paid.

Sincerely

A handwritten signature in black ink, appearing to be "Peter R. Anske", with a long horizontal flourish extending to the right.

Peter R. Anske
President & CEO