

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 13, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000007398

1. Entity Name  
V.I.P. MARKETING GROUP, INC.



Principal Place of Business  
VIP MARKETING GROUP, INC.  
PUNTA GORDA, FL 33950

Mailing Address  
1584 AQUI ESTA DR.  
PUNTA GORDA, FL 33950



01072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0975291

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

TEAGUE, EILEEN  
1584 AQUI ESTA DR  
PUNTA GORDA, FL 33950

**DO NOT WRITE  
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 *Eileen Teague*

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/12/04

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DP  
TEAGUE, EILEEN  
1584 AQUI ESTA DR  
PUNTA GORDA, FL 33950

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DV  
TEAGUE, EDWIN F  
1584 AQUI ESTA DR  
PUNTA GORDA, FL 33950

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ST  
TEAGUE, EILEEN  
1584 AQUI ESTA DR  
PUNTA GORDA, FL 33950

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

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01/14/04-80011-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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 *Eileen Teague* EILEEN TEAGUE 1/12/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #