


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000028897 1. Entity Name VICTOR BEDDOE INC.	
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Principal Place of Business 1525 SE 5TH PLACE CAPE CORAL, FL 33990	Mailing Address 1525 SE 5TH PLACE CAPE CORAL, FL 33990
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07102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1578422	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BEDDOE, VICTOR 1525 SE 5TH PLACE CAPE CORAL, FL 33990

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

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEDDOE, VICTOR 1525 SE 5TH PLACE CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BEDDOE, JANET M 1525 SE 5TH PLACE CAPE CORAL, FL 33990
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<p>U000000772125 08/16/07-80002-011 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Victor Beddoe VICTOR BEDDOE AUG 10, 07 239-464-5835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

C #1245