



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000098369	
1. Entity Name VASS TRUCKING INC.	

Principal Place of Business 15306 PETRUS LANE CLERMONT, FL 32714	Mailing Address 15306 PETRUS LANE CLERMONT, FL 32714
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DO NOT WRITE IN THIS SPACE

	
03122008	No Chg-P CR2E034 (11/05)
4. FEI Number 20-3193273	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	
SAMARU, SUDESH 15306 PETRUS LANE CLERMONT, FL 32714	

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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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	05/22/08-80088-013 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS SAMARU, SUDESH 15306 PETRUS LANE CLERMONT, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SAMARU, INDIRA 15306 PETRUS LANE CLERMONT, FL 34714
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Sudesh Samaru 4-26-08 813-830-8811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #