

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141225

Entity Name: VAGU CORP

FILED
Jun 11, 2009
Secretary of State

Current Principal Place of Business:

10097 CLEARY BLVD.
135
PLANTATION, FL 33324

New Principal Place of Business:

15970 W S.R 84
231
SUNRISE, FL 33326

Current Mailing Address:

10097 CLEARY BLVD.
135
PLANTATION, FL 33324

New Mailing Address:

15970 W S.R 84
231
SUNRISE, FL 33326

FEI Number: 41-2218951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, YNGRID Y
965 NORTH NOB HILL RD
135
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

SILVA, YNGRID Y
15970 W S.R 84
231
SUNRISE, FL 33326 US

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.

SIGNATURE:

06/11/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILVA, YNGRID Y
Address: 965 NORTH NOB HILL RD # 135
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: MARIA-RODRIGUEZ, ANTONIO
Address: 965 N. NOB HILL ROAD STE. 135
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SILVA, YNGRID Y
Address: 15970 W S.R 84 231
City-St-Zip: SUNRISE, FL 33326

Title: D (X) Change () Addition
Name: MARIA-RODRIGUEZ, ANTONIO
Address: 15970 W S.R 84 231
City-St-Zip: SUNRISE, FL 33326

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SILVA YNGRID Y

P

06/11/2009

Electronic Signature of Signing Officer or Director

Date