


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P18575 1. Entity Name V.E.P. ENTERPRISES, INC.	
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Principal Place of Business 212 W. CERVANTES ST PENSACOLA, FL 32501 US	Mailing Address P O BOX 12387 PENSACOLA, FL 32591-2387 US
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DO NOT WRITE IN THIS SPACE



02212006 No Chg-P CR2E034 (11/05)

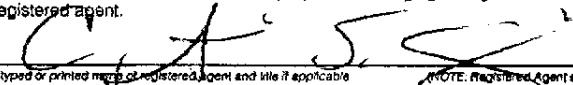
4. FEI Number 63-0943271	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRAIG, CYNTHIA S
436 CREARY STREET
PENSACOLA, FL 32507

**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  DATE 3-2-06

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

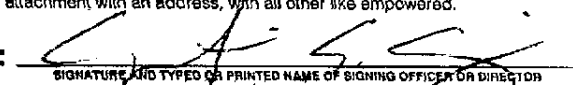
9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CRAIG, CYNTHIA S. 212 CERVANTES ST, P O BOX 12387 PENSACOLA, FL 325912387
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000469363
03/25/06-80026-004 150.00

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IN THIS SPACE**

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:  DATE 3-2-06 850-433-5806

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

Cynthia S. Craig