

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 A
Secretary of State

DOCUMENT # P94000061206

1. Entity Name
PIPS HOLDINGS, INC.



Principal Place of Business

1001 3RD AVE W
SUITE 700
BRADENTON, FL 34205 US

Mailing Address

1001 3RD AE
SUITE 700
BRADENTON, FL 34205 US



01032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0523067

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SAMS, TREVOR
2331 63RD AVE E
SUITE L
BRADENTON, FL 34203

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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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U000000733942
05/09/07-80101-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SAMS, TREVOR
STREET ADDRESS	PRIMROSE HOUSE DOWN HILL
CITY-ST-ZIP	TOTNES DEVON TQ9 5ES ENGLAND,
TITLE	DS
NAME	SAMS, SUE
STREET ADDRESS	PRIMROSE HOUSE DOWN HILL
CITY-ST-ZIP	TOTNES DEVON TQ9 5ES ENGLAND,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/07
Date

Daytime Phone #