

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000022897

1. Entity Name  
SUGARLIPS, INC.



**FILED**  
**Feb 04, 2004 8:00 am**  
**Secretary of State**

02-04-2004 90047 028 \*\*\*150.00

Principal Place of Business: 7808 SW 6TH COURT  
NORTH LAUDERDALE, FL 33068

Mailing Address: 7808 SW 6TH COURT  
NORTH LAUDERDALE, FL 33068

2. Principal Place of Business  
5135 N. U.S. 1

Suite, Apt. #, etc.  
Fort Pierce, FL

City & State

3. Mailing Address  
6024 Indrio Road #5

Suite, Apt. #, etc.  
Fort Pierce, FL

City & State

01312004

Chg-P

CR2E034 (10/03)

4. FEI Number  
65-0658706

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

Zip  
34946

Country  
U.S.A.

Zip  
34951

Country  
U.S.A.

## 6. Name and Address of Current Registered Agent

CIRILLO, VIRGINIA M  
7808 SW 6TH COURT  
NORTH LAUDERDALE, FL 33068

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6024 Indrio Road #5

City Fort Pierce

FL

Zip Code  
34951

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, 2004 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD  
NAME CIRILLO, VINCENT  
STREET ADDRESS 7808 SW 6TH COURT  
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068 ☐ Delete

TITLE STD  
NAME CIRILLO, VIRGINIA M  
STREET ADDRESS 7808 SW 6TH COURT  
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS 6024 Indrio Road #5  
CITY-ST-ZIP Fort Pierce, FL 34951 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 6024 Indrio Road #5  
CITY-ST-ZIP Fort Pierce, FL 34951 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Virginia M. Cirillo Virginia M. Cirillo

1/30/04 (772) 429-1317

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #