FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000073480**

1. Corporation Name

VUU ENTERPRISES, INC.

Principal Place of Business	-23
2801 34TH ST. SOUTH ST. PETERSBURG FL 33711	
•	

Mailing Address

2801 34TH ST. SOUTH ST. PETERSBURG FL 33711

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90197 003 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

08/25/1997

2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		Applied For		
21		26		59-3465055		Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State	3	City & State		6. Election Campaign Financing	\$5	.00 May Be		
23		28		Trust Fund Contribution	, ,	ided to Fees		
Zip	Country	Zip Country			8. This corporation owes the current year Intangible			
24	25	29 30	0		Personal Property Tax.	✓ Yes	s □No.	
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
				Name				
PECK, EDWIN			82	82 Street Address (P.O. Box Number is Not Acceptable)				
259 4TH AVENUE NORTH			62	62 Street Address (P.O. Box Number is Not Acceptable)				
ST. PETERSBURG FL 33701-2911		83	83					
		84	City		FL 85	Zip Code		
44 Durauant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the above	-named como	pration submits this statement for the	nurnose of changing	ng its registered	
office or re	egistered agent, or both, in the State (of Florida. Such change was autr	попиеа ву	tne corporatioi	n's board of directors. I hereby accep	t the appointment	as registered	
agent. I a	n familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes	•			ļ	
SIGNATURE	Signature, typed or printed name of registered agent	ALOUE PERSONNELL MOTE PA	pointered Aper	t signature required	when reinstation)	DATE		
12.	OFFICERS AN		13.	it aignatura required	ADDITIONS/CHANGES TO OF		ECTORS IN 12	
TITLE	P	DELETE	1.1 TITLE		, and the second	□ Ch		
ļ	YUU. TY		1.2 NAME	1				
NAME	2801 34TH ST. S		1.3 STREET	ADDRESS				
STREET ADDRESS	ST PETERSBURG FL 33711					•		
CITY-ST-ZiP	ST ST	☐ DELETE	1.4 CITY-ST 2.1 TITLE	1-ZIP		☐ Ch	ange Addition	
TITLE .	- -	C OLLETE						
NAME	VUU, ANN K		2.2 NAME				Î	
STREET ADDRESS	2801 34TH ST. S.	2.3 STREET ADDA					·	
CITY-ST-ZIP	ST PETERSBURG FL 33711	☐ DELETE	2. 4 CITY-S	T-ZIP		Ch	ange Addition	
TITLE		□ DELETE	3.1 TITLE				1,190 (
NAME			3.2 NAME				i	
STREET ADDRESS	•		3.3 STREE	ADDRESS				
CITY-ST-ZIP			3.4, CITY-S	T-ZIP			ange	
TITLE		· DELETE	4.1 TITLE			☐ Ch	ange LI Auditon	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP	<u> </u>		4.4 CITY+S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE		,	□ Ch	ange 🗌 Addition	
NAME			5.2 NAME	,				
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP	<u> </u>		5.4 CITY+S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			□ Ch	ange 🗌 Addition	
NAME	•		6.2 NAME					
STREET ADDRESS		•	6.3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP		1		
UIT-51-ZP	<u> </u>	h this files does not evalify for th			action 119 07(3)(i) Florida Statutes		t the information	

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 informationated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: