

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008429

FILED
Apr 27, 2007
Secretary of State

Entity Name: PURPLE PEOPLE MOVERS INC.

Current Principal Place of Business:

13625 -50TH WAY N. #17
CLEARWATER, FL 33760

New Principal Place of Business:

6561 44TH ST. N.
#3006
PINELLAS PARK, FL 33781

Current Mailing Address:

13625 -50TH WAY N. #21
CLEARWATER, FL 33760

New Mailing Address:

6561 44TH ST. N.
#3006
PINELLAS PARK, FL 33781

FEI Number: 59-3488674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, STEVE
7726 -40TH TERR N.
SAINT PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARROLL, STEVE
Address: 7726 40TH TERR. NORTH
City-St-Zip: ST. PETE, FL 33707

Title: ST () Delete
Name: SCHAUERMAN, MIKE
Address: 4500 27TH AVE. NORTH
City-St-Zip: ST. PETE, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MIKE SCHAUERMAN

ST

04/27/2007

Electronic Signature of Signing Officer or Director

Date