


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000053119
1. Entity Name
VIP CAPITAL, INC.



Principal Place of Business
2744 SUMMERDALE DRIVE NORTH
SUITE 103
CLEARWATER, FL 33761

Mailing Address
2744 SUMMERDALE DRIVE NORTH
SUITE 103
CLEARWATER, FL 33761

DO NOT WRITE IN THIS SPACE



08152005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3516338

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
SOWERS, RICHARD W
175 JOYCE ST
SAFETY HARBOR, FL 34695

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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	PD SOWERS, RICHARD W 2744 SUMMERDALE DRIVE NORTH CLEARWATER, FL 33761
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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: *Richard W Sowers* 8/15/05 727-712-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #