

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # S13490

1. Entity Name
V.P. RECORDS OF FLORIDA, INC.



Principal Place of Business

6022 SW 21ST ST
MIRAMAR, FL 33023

Mailing Address

6022 SW 21ST ST
MIRAMAR, FL 33023



02132008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0254628
Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHUNG, ANGELA
4394 SW 131 AVE
DAVIE, FL 33330

**DO NOT WRITE
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

Angela Chung

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/13/08
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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
CP
CHIN, VINCENT R
89-05 138TH STREET
JAMAICA, NY 11435

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DT
CHIN, CHRISTOPHER
89-05 138TH STREET
JAMAICA, NY 11435

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
CHUNG, ANGELA
4394 SW 131 AVE
DAVIE, FL 33330

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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02/26/08-80050-024 158.75

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: ANGELA CHUNG

Angela Chung
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-13-08

954-966-4744

Date

Daytime Phone #