2008 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 19, 2008 08:00 AM Secretary of State DOCUMENT # V58923 ANNETTE'S VAULT SERVICES, INC. Principal Place of Business Mailing Address 2301 N 401H ST PO BOX 310675 TAMPA, FL 33605 TAMPA, FL 33680 01232008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3142413 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COLLINS, PERCY DO NOT WRITE 2308 N 40TH ST TAMPA, FL 33605 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) W. 101 27 1/2 1 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. -Added to Fees ⊺ ,After∞May 1, 2008 Fee will be \$550.00 .10, OFFICERS AND DIRECTORS THILE NAME COLLINS, PERCY 2301 N 40TH ST STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33605 TITLE COLLINS, MILDRED NAME U00000832120 02/27/08-80047-007 150.00 STREET ADDRESS 2301 N 40TH ST CITY-ST-ZIP TAMPA, FL 33605 THUE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME

.12. I nereby 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:

STREET ADDRESS CITY-ST-ZIP -TIÌLE NAME STREET ADDRESS CITY-ST-ZIP :

Daytime Prone #

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