

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044754

FILED  
May 12, 2008  
Secretary of State

Entity Name: VAVOOM ENTERPRISES, INC.

**Current Principal Place of Business:**

309 OAKLAKE LANE  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 5156  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number: 20-8835640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DELUCCA, MICHAEL  
309 OAKLAKE LANE  
NICEVILLE, FL 32578 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: DELUCCA, MICHAEL  
Address: 4673 EAST HIGHWAY 20  
City-St-Zip: NICEVILLE, FL 32578

Title: P ( ) Delete  
Name: DELUCCA, MARK  
Address: 4673 EAST HIGHWAY 20  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: DELUCCA, MICHAEL  
Address: 309 OAKLAKE LANE  
City-St-Zip: NICEVILLE, FL 32578

Title: P (X) Change ( ) Addition  
Name: DELUCCA, MARK  
Address: 309 OAKLAKE LANE  
City-St-Zip: NICEVILLE, FL 32578

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: MICHAEL DELUCCA

PRES

05/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date