

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104650

FILED
Apr 28, 2004
Secretary of State

Entity Name: VALENCIA LUXURY HOMES, INC.

Current Principal Place of Business:

1339 EAST VINE STREET
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1339 EAST VINE STREET
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 13-4265806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIJADA, NELLY
2110 WALDEN PARK CIRCLE
103
KISSIMMEE, FL 34744

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: QUIJADA, NELLY
Address: 2110 WALDEN PARK CIRCLE # 103
City-St-Zip: KISSIMMEE, FL 34744

Title: VP () Delete
Name: QUIJADA, JORGE
Address: 2110 WALDEN PARK CIRCLE # 103
City-St-Zip: KISSIMMEE, FL 34744

Title: S () Delete
Name: QUIJADA, NELLY
Address: 2110 WALDEN PARK CIRCLE # 103
City-St-Zip: KISSIMMEE, FL 34744

Title: T () Delete
Name: QUIJADA, JORGE
Address: 2110 WALDEN PARK CIRCLE # 103
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: NELLY QUIJADA

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date