2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 29, 2005
Secretary of State

DOCUMENT# P03000139562

Entity Name: VALVEN, INC.

Current Principal Place of Business:

10775 VILLAGE CLUB CIR #205
ST PETERSBURG, FL 33716

New Principal Place of Business:

6023 LANSHIRE DRIVE
TAMPA, FL 33634

Current Mailing Address:

10775 VILLAGE CLUB CIR #205
ST PETERSBURG, FL 33716

New Mailing Address:

6023 LANSHIRE DRIVE
TAMPA, FL 33634

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARROQUIN, RAUL OSCAR
10775 VILLAGE CLUB CIR #205
ST PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

MARROQUIN, RAUL O
6023 LANSHIRE DRIVE
TAMPA, FL 33634 US

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: RAUL OSCAR MARROQUIN 07/29/2005
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: D ( ) Delete
Name: MARROQUIN, RAUL OSCAR
Address: 10775 VILLAGE CLUB CIR #205
City-St-Zip: ST PETERSBURG, FL 33716

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MARROQUIN, RAUL O
Address: 6023 LANSHIRE DRIVE
City-St-Zip: TAMPA, FL 33634 US

Title: S ( ) Change (X) Addition
Name: MARROQUIN, RAUL O
Address: 6023 LANSHIRE DRIVE
City-St-Zip: TAMPA, FL 33634 US

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: RAUL OSCAR MARROQUIN D 07/29/2005
Electronic Signature of Signing Officer or Director Date