FILED

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90114 021 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000093626

1. Corporation Name

VALUED CONSULTING GROUP, INC.

Principal Place of Business Mailing Address				Lidbildet tie terri senti entit entit entit	112 12100 mm 2012 (1000 2011 (521
MIAMI FL 33144		7950 W. FLAGLER ST., SUITE 101 MIAMI FL 33144 US		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed	
				10/30/1997	
Principal Place of Business 2		2a. Mailing Address		4. FEI Number	Applied For
21	*. <u></u>	26	·	65-0792675	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3 11.5	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	This corporation owes the current year Personal Property Tax.	Intangible
24	[25]	29 30	0	10. Name and Address of New Registere	
-	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of Now Youghton	A Ago
7950	N, RAFAEL A W. FLAGLER ST., SUITE 101 NI FL 33144		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
			. 84 City	· · F	85 Zip Code
A 65000 05 50	to the provisions of Sections 607.0502 egistered agent, or both, in the State of In familiar with, and accept the obligat	of Florida. Such change was auff	norized by the comors	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re			egistered Agent signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.	· OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE .	D	☐ DELETE	1.1 TITLE		
NAME	AZAN, RAFAEL A		1.2 NAME		
STREET ADDRESS	7950 W. FLAGLER ST., SUITE	101	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144	CT DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE	D	. DELETE	2.1 TITLE		C Guardo C vaguasis
1	NAME AZAN, MIRTHA B		2.2 NAME		
STREET ADDRESS	7950 W. FLAGLER ST., SUITE	101	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144	DELETE -	2. 4 CITY-ST-ZIP		Change Addition
TITLE		→ □ DELETE - →		-	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	_		3.4. CITY-ST-ZIP		

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered.

4.1 TITLE

4, 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

PAGE RERAFAECIADA 2.4 ~
NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

□ DELETE

DELETE

☐ Change

Change

Change

☐ Addition

Addition

☐ Addition