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2000 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name

## FILED Feb 05, 2000 8:00 am Secretary of State

VALCORP CAPITAL MANAGEMENT, INC.					02-05-2000 90011 036 ***150.00			
Principal Place	e of Business	Mailing Address		<del></del> -				
6045 ROKLING		6045 ROLLING ROAD PRIVE						
MIAMI/FL 33156/ MIAM US US		MIRMI FL 38156-5628 US	MINAN FL 36156-5628 US		Raci	3415		
, <b>,</b> 		•			1   <b>2  </b> 1   <b>2  </b> 1   <b>1   1   1   1   1   1   1   1   1 </b>	1 <b>88</b> 111 1 <b>8818</b> 11 <b>8</b> 11 <b>88</b> 11 <b>8</b> 17	A14 /15/ 1551	
8360	West Flagler St.	3. Mailing Address 8360 West Flag	ler St.					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.  Suite 200		ĺ	DO NOT WRITE IN	1 THIS SPACE		
City & State		City & State Miami Florida	«.	4.	FEI Number 65-0455057	<u> </u>	pplied For	
Zip	Country	Zin	Country _		Certificate of Status Desired	\$8.75 Add	, .	
33144-		33144-2075	USA	. L	<u> </u>	Fee Require		
<u> </u>	6. Name and Address of Current	Registered Agent	Name		Name and Address of New Regis	легеа Аделт		
GARI	DANO, ENRIQUE			Enrigo dress (P.O. F				
	ROLLING ROAD DRIVE		777	7 Art	ox Number is Not Acceptable) hur Goc(+rey 17 o	<u>ad',                                    </u>		
MIAN	NFL 33156			third	Floor			
			_ City	iami	Beach	FL Zip Cod	140_	
8. The above	named entity submits this statement fo	r the purpose of changing its re	gistered office or r	registered ag	ent, or both, in the State of Florida			
		alumo			//	21/00 11		
SIGNATURE _ 	Signature, keed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature	e required when re	einstating)	DATE		
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!! After MAY 1, 2000 Make Check Payable	•	50. <b>00</b>	Election Campaign Financ     Trust Fund Contribution.		00 May Be d to Fees	
11.	OFFICERS AND		12.		DDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 11	
TITLE	P	☐ Delete	TITLE		7	Change	☐ Additio	
NAME STREET ADDRESS	gardano, enrique 6045/rolling røad drive		NAME STREET ADDRESS	7425	SW 56th Ave			
CITY-ST-ZIP	MIAMI FL		• • • • • • • • • • • • • • • • • • • •	Miam	i Fla. 33143			
TITLE		☐ Delete	TITLE			☐ Change	Additio	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE	and the second s	Delete :- The Delete	reTITLE →			Change	Additio	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME			Change	Additio	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME		,	☐ Change	☐ Additio	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	☐ Additio	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP				 	
13. I hereby of indicated of the corp changed,	ertify that the information supplied with on this report or supplemental report is poration or the receiver of trustee empor or on an attachment with an address,	n this filing does not qualify for it is true and accurate and that my owered to execute this report as with all other like empowered.	he exemption state dignature shall ha prequired by Chap	ed in Section we the same oter 607, Flor	119.07(3)(i), Florida Statutes. I fur legal effect as if made under oath ida Statutes; and that my name ap	ther certify that the instance of the that I am an officer opears in Block 11 o	ntormation or director Block 12 if	