


2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Feb 04, 2008 8:00 am**  
**Secretary of State**

02-04-2008 90056 042 \*\*\*150.00

**DOCUMENT # 331338**

1. Entity Name  
**VALE MANAGEMENT, INC.**



Principal Place of Business  
**2351 W FLAGLER ST  
MIAMI, FL 33135**

Mailing Address  
**2351 W FLAGLER ST  
MIAMI, FL 33135**

2. Principal Place of Business - No P.O. Box #  
**3047 S.W. 38 COURT**

3. Mailing Address  
**3047 SW 38 COURT**

Suite, Apt. #, etc.



01042008 Chg-P CR2E034 (12/06)

City & State  
**MIAMI FL**

City & State  
**MIAMI FL**

Zip  
**33146**

Country  
**USA**

Zip  
**33146**

Country  
**USA**

4. FEI Number  
**59-1321541**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**VIDAL, SERGIO C  
2351 WEST FLAGLER STREET  
MIAMI, FL 33135**

7. Name and Address of New Registered Agent

Name  
**VIDAL SERGIO C.**

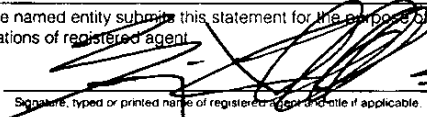
Street Address (P.O. Box Number is Not Acceptable)  
**3047 S.W. 38 COURT**

City  
**MIAMI**

FL

Zip Code  
**33146**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **SERGIO C. VIDAL**

(NOTE: Registered Agent signature required when reinstating)

DATE **1/4/08.**

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD O'DELL, ANA 2351 W FLAGLER ST MIAMI, FL 33135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VIDAL, SERGIO C. 2351 WEST FLAGER ST MIAMI, FL 33135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VIDAL, TERESA 2351 WEST FLAGLER ST MIAMI, FL 33135	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VIDAL, SERGIO C 2351 WEST FLAGER ST MIAMI, FL 33135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V O'DELL ANA 3047 S.W. 38 COURT MIAMI FL 33146	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS VIDAL SERGIO C. 3047 S.W. 38 CT. MIAMI FL 33146	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VIDAL THERESA 3047 S.W. 38 COURT MIAMI FL 33146	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SERGIO C. VIDAL**

DATE: **1/4/08**

DAVTIME PHONE #: **305 642 5555**