

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 355648

FILED  
Feb 18, 2005  
Secretary of State

Entity Name: VALOR CORPORATION OF FLORIDA

## Current Principal Place of Business:

1001 SAWGRASS CORP PKWY  
SUNRISE, FL 33323 US

## New Principal Place of Business:

## Current Mailing Address:

1001 SAWGRASS CORP PKWY  
SUNRISE, FL 33323 US

## New Mailing Address:

FEI Number: 59-1278865

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEWTON, DONNA J  
3170 WILLOW LANE  
FT LAUDERDALE, FL 33331 US

## 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: PSD ( ) Delete  
Name: NEWTON, DONNA J  
Address: 3170 WILLOW LANE  
City-St-Zip: FT. LAUDERDALE, FL

Title: VPD ( ) Delete  
Name: NEWTON, BURT E  
Address: 12100 NW 6TH STREET  
City-St-Zip: PLANTATION, FL 33325

Title: VP ( ) Delete  
Name: PERNAS, MARIA  
Address: 16481 NE 31 AVENUE  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

## 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:

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: DONNA J. NEWTON

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02/18/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date