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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 22 1997 8:00am

Secretary of State

CR2E034 (9/96)

A PRESENCIAL PRINCIPAL CALLE AND CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9300003278 (9)

ORLANDI VALUTA, INC.

SIGNATURE:

Suite, Apt. #, etc.			
LOS ANGELES CA 90013 2. Principal Place of Business 2. A Mailing Address 3. Date Incorporated or Qualified ON/02/19986 2. Principal Place of Business 3. Suite. Apr. #. etc. 25 Suite. Apr. #. etc. 27 Suite. Apr. #. etc. 27 City & State 28 City & State 29 Country 29 Zis 29 Suite. Apr. #. etc. 29 Country 29 Suite. Apr. #. etc. 29 Suite. Apr. #. etc. 29 Country 29 Suite. Apr. #. etc. 29 Suite. Apr. #. etc. 29 Suite. Apr. #. etc. 39 Suite. Apr. #. etc. 39 Suite. Apr. #. etc. 30 Suite. Apr. #. etc. 31 Suite. Apr. #. etc. 32 Suite. Apr. #. etc. 32 Suite. Apr. #. etc. 32 Suite. Apr. #. etc. 33 Suite. Apr. #. etc. 34 Suite. Apr. #. etc. 35 Suite. Apr. #. etc. 36 Suite. Apr. #. etc. 36 Suite. Apr. #. etc. 36 Suite. Apr. #. etc. 37 Suite. Apr. #. etc. 38 Suite. Apr. #. etc. 39 Suite. Apr. #. etc. 30 Suite. Apr. #. etc. 31 Suite. Apr. #. etc. 31 Suite. Apr. #. etc. 32 Suite. Apr. #. etc. 33 Suite. Apr. #. etc. 34 Suite. Apr. #. etc. 35 Suite. Apr. #. etc. 35 Suite. Apr. #. etc. 36 Suite. Apr. #. etc. 37 Suite. Apr. #. etc. 38 Suite. Apr. #. etc. 38 Suite. Apr. #. etc. 38 Suite. Apr. #. etc. 39 Suite. Apr. #. etc. 30 Suite. Apr. #.	1001		
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129 EGRET CIRCLE WEST PALM BEACH FL 33413 82 Street Address (P.O. Box Number is Not Acceptable) 83			
WEST PALM BEACH FL 33413 83 84 City			
Bal City FL 85 Zip Code			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 607 0505, Florida Statutes, SIGNATURE SIGNATURE Signature, typical or provide name of registered agent and late it explicitable. (NOTE Registered Agent agrature required when reinstaling). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THIS CHANGE. SIGNATURE IN THIS CHANGE. SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP TITLE CRAME SIREET ADDRES			
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office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE Signature Structure of printed name of registered agent and life it applicable (NOTE Registered Agent agrature required when reinstating) DATE	3		
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14. I do 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 family report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or I am an officer or director of the exporation 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 in changed, or fin an attrachment with an address.	path; that		

INNO OFFICER OR DIRECTOR