2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K21496

HERNANDO & VALENCIA PROPERTIES, INC.



Mailing Address

Principal Place of Business 510 VALENCIA, APT. #2 CORAL GABLES, FL 33134

510 VALENCIA, APT. #2 CORAL GABLES, FL 33134

FILED Mar 13, 2006 08:00 AM Secretary of State



03072006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0057838

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

305-445-0153

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CALIN, PETER J 13950 SW 100 AVE MIAMI, FL 33176

SIGNATURE: .

DO NOT WRITE IN THIS SPACE

	named enlity submits this statement for the pa lone of registered agent.	rpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Floride. I am familiar with, and accept
SIGNATURE.	Eignature, typed or printed name of regionsed agent and title if	applicable (NOTE: Registered	Agent eignatur	required when rehistering)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	oing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	· · · · · ·		· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, ELVA P.O. BOX 187 N/A COLON REPUBLIC OF PANAMA, RE				
Hitle Name Street address City-St-Bp	DVPS PRETTO, JUDY M 510 VALENCIA AVE., #1 CORAL GABLES, FL			950000466485 03/23/06-80812-017 1 58.75	
Title Name Street address City-St-Zip	T GONZALEZ, ELVA P.O. BOX 187 COLON, REPUBLIC OF PANAMA,			DO	NOT WRITE
TITLE HAME STREET ADDRESS C(TY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
title Hame Street Address City-St-Zip					
12. I hereby certify that the information supplied with this filting 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 charged, or on an attachment with an address, with all piece like empowered.					

JUDY M. PRETTO

HE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR