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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 13 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K51147

(2)

VALUE MANAGEMENT INC.

| Propried Place of Puringes Mailing Address | | | { | | |
|--|---------------------------------------|------------------------------------|---|--|---|
| Principal Place of Business * LOLA NASHASHIBI 1940 SOUTH OCEAN BLVD. | | Mailing Address * LOLA NASHASHIBI | | | |
| | | 1940 SOUTH OCEAN BLVD. | | | |
| MANALAPAN FL 33462 | | MANALAPAN FL 33462-62 | 19 | Date Incorporated or Qualified 12/14/1988 | 3a. Date of Last Report 04/19/1996 |
| 2. Principal Place of B | usiness | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 65-0105595 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | D. Octimodio di didice di di | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | Country | 28 Zip | Country | Trust Fund Contribution | Added to Fees |
| Zip | Country 25 | 29 | 30 | This corporation has liability for Florida Statutes | r intangible tax under s. 199.032, |
| 24 9. Na | me and Address of Curre | | [30] | 10. Name and Address of New R | — |
| NASHASHIE | LOLA | | 81 Name | | |
| | H OCEAN BLVD. | | 82 Street A | ddress (P.O. Box Number is Not Accepta | blot |
| MANALAPA | | | OZ Street A | odiess (F.O. Box Number is Not Accepta | able) |
| | | | 83 | | |
| | | | 84 - City | | 85 Zip Code |
| | | | | | FL T T T T T T T T T |
| 11. Pursuant to the pr | visions of Sections 607.05 | 02 and 607 1508, Florida Statu | ites, the above-named o | orporation submits this statement for the oration's board of directors. I hereby according | purpose of changing its registered |
| agent. Lam familia | r with, and accept the obli- | gations of, Section 607.0505, F | lorida Statutes. | oration's board of directors. Thereby acce | apt the appointment as registered |
| SIGNATURE | | | | | |
| | yped or printed name of registered as | | TE Registered Agent signature r | equired when reinstaling) ADDITIONS/CHANGES TO OFF | DATE |
| 12. | OFFICERS AI | ND DIRECTORS DELETE | 13. 1,1 TITLE | ADDITIONS/CHANGES TO OFF | Change Addition |
| - | ASHIBI, LOLA | tand Decert | 1.2 NAME | | |
| | S. OCEAN BLVD. | | 1.3 STREET ADDRESS | | |
| | LAPAN FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 2.1 TITLE | | Change Addition |
| NAME | | | 2.2 NAME | • | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | , | |
| CITY-ST-ZIP | | | 2 4 CHTY-ST-ZIP | 3 | |
| TITLE | | ☐ DELETE | 31 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| City-ST-ZIP | | | 3.4. CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | Change L. Addition |
| NAME | | | 4. 2 NAME | | |
| TATAL | | | 4.3 STREET ADDRESS | | |
| STREET ADDRESS | | | | | |
| STREET ADDRESS CHY-ST-ZIP | | L Driete | 4.4 CITY - ST - ZIP | | Change Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE | | ☐ DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE | | ☐ Change ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME | | ☐ Change ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | | ☐ Change ☐ Addition |
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| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STBEET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE | . ; ; | ☐ Change ☐ Addition ☐ Change ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | | | 4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 DITY - ST- ZIP 6.1 TITLE 6.2 NAME | <i>Σ</i> . † | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | 4.4 CITY - ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS | ÷ | |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP | that the information suppli | DELETE | 4.4 CITY - ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP | ated in Section 119.07(3)(i), Florida Statu that my signature shall have the same leg port as required by Chapter 607, Florida | Change Addition |