


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000021683

1. Entity Name
VALEN HOLDINGS, L.C.



Principal Place of Business 1902 HARBOR POINT CIRCLE WESTON, FL 33327	Mailing Address 1902 HARBOR POINT CIRCLE WESTON, FL 33327
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DO NOT WRITE IN THIS SPACE



04292004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 82-0570441	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**ROZENCWAIG, LESLIE ALAN P.A.
ONE SE THIRD AVENUE, SUITE 960
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent's signature required when re-stating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROBAYO, JULIO CESAR 1902 HARBOR POINT CIRCLE WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RUBIO, PATRICIA 1902 HARBOR POINTE CIRCLE WESTON, FL 33327
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/05/04-80077-022 50.00

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IN THIS SPACE**

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Patricia Rubio*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #