2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M19278

1 Fotity Name

VALLEY MANOR SOUTH, INC.



Principal Place of Business

11825 SOUTH DIXIE HWY MIAMI, FL 33156-4439

Mailing Address

11825 SOUTH DIXIE HWY MIAMI, FL 33156-4439

FILED Feb 05, 2007 08:00 AM Secretary of State



01082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2563071

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

STANLEY, RUBY 11825 SOUTH DIXIE HWY MIAMI, FL 33156

DO NOT WRITE IN THIS SPACE

				i ni	nis space
8. The above the obligat	named entity submits this statement for the plans of registered agent.	purpose of changing its registered	office or r	egistered agent, or both	h, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature typed or printed name of registered agent and title to	l applicable (NOTE: Registered A	igent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution	ing .	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	P RUBY, STANLEY 11825 S. DIXIE HWY MIAMI, FL 331564439		•		000000621590 02/12/07-80023-003 158.7
NAME STREET ADDRESS CHY-ST-ZIP	S COURTRIGHT, GERALD 11825 S. DIXIE HWY MIAMI, FL 331564439				
TITLE Name Street address City-St-Zip				DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME					

12. I hereby certify that the information supplied with this filing 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 traffice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

1-25-2007