

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000025038

1. Entity Name
VALUBUILD PANEL HOMES CORP.



Principal Place of Business
4723 W. ATLANTIC AVE
SUITE A2
DELRAY BEACH, FL 33445 US

Mailing Address
4723 W. ATLANTIC AVE
SUITE A2
DELRAY BEACH, FL 33445 US



02052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0999664

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRONSTEIN, MARC
1649 E CLASSICAL BLVD
DELRAY BEACH, FL 33445-1204

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BRONSTEIN, MARC
STREET ADDRESS 1649 E CLASSICAL BLVD
CITY-ST-ZIP DELRAY BEACH, FL 334451204

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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0000000931744
05/22/08-80026-019 150.00

**DO NOT WRITE
IN THIS SPACE**

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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARC BRONSTEIN

FEB 5, 2008

Date

561 491 7355

Daytime Phone #