

From PARADISE HARDWARE 305893935

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05-14-2002 90517 001 *****8.75
05-14-2002 90517 002 ***150.00
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DOCUMENT # P000000 55308

Valpo Painting & Water-proofing Inc.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

11510 Biscayne Blvd
Suite, Apt. 5 etc.

11510 Biscayne Blvd
Sunny Apt. 4, etc.

City & State: Miami Florida
Zip: Country:

City & State: Miami Florida
/10 Country:

4. FILE NUMBER: 65-1019589

Applied For
Not Applicable:

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

NAME _____

Street Address (P.O. Box Number is Not Accepted)

City

FL

Sup Court

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 Liberia.

^aValues are means $\pm$ standard error of the mean. ^bValues are means $\pm$ standard error of the mean.

N,N'-Bis(2-oxo-2-phenylacetyl)hydrazine (1,1'-diphenylhydrazine)

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9. This corporation is eligible to satisfy its intangible tax filing requirement and elect to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. $\frac{1}{2} \ln \frac{2}{3} + \frac{1}{2} \ln \frac{3}{2} + \frac{1}{2} \ln \frac{2}{3}$

NAME	PD
SSN	Valdes, Victor H. Jr.
DATE OF BIRTH	21445 NE 19 Ct
CITY ST ZIP	Miami FL 33179

FILE
NAME
DATE AND TIME
CHANGES

FILED	STD
NAME	Valdes, Pedro F.
STREET ADDRESS	695 NE 172 Street
CITY	N. Miami Bch Fl 33162
STATE	
ZIP CODE	

FILE
NAME
STREET ADDRESS
CITY STATE
ZIP
PHONE
FAX

TIME
NAME
E-MAIL ADDRESS
DATE / 01 / 20
TIME
NAME
E-MAIL ADDRESS
DATE / 01 / 20

NAME	NAME
STREET ADDRESS	STREET ADDRESS
CITY, ST, ZIP	CITY, ST, ZIP

THE
SCHOOL
OF THE
MAYOR

FILE	
NAME	
SIGNATURE	
DATE	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this form is true and correct, and that my signature shall have the same legal effect as if made under oath by an officer or director of the corporation or the receiver or trustee empowered to execute the report required by Chapter 400, Florida Statutes, and that my name appears in block 11 or on an attachment with an address, with all other filers on page 1.

SIGNATURE:

Victor A. Valdez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 305 496-4040