2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P01000051305

Entity Name: VALERI'S TROPICALS, INC.

Current Principal Place of Business:

804 MONET STREET
LEHIGH ACRES, FL 33936

New Principal Place of Business:

1210 ARCHDALE ST
LEHIGH ACRES, FL 33936

Current Mailing Address:

804 MONET STREET
LEHIGH ACRES, FL 33936

New Mailing Address:

PO BOX 309
LEHIGH ACRES, FL 33970

FEI Number: 65-1108896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOWERS, ROBERT L
23 COLORADO ROAD
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WATERS, VALERI
Address: 804 MONET STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VD ( ) Delete
Name: WATERS, TIM
Address: 804 MONET STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TD ( ) Delete
Name: COWHAM, KARON
Address: 804 MONET STREET
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WATERS, VALERI
Address: 1210 ARCHDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VD (X) Change ( ) Addition
Name: WATERS, TIM
Address: 1210 ARCHDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: TD (X) Change ( ) Addition
Name: COWHAM, KARON
Address: 1210 ARCHDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALERI WATERS OWNE 04/27/2005
Electronic Signature of Signing Officer or Director Date