2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067668

Entity Name: VALMARC SERVICES, INC.

FILED Jul 05, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5202 5TH STREET WEST LEHIGH ACRES, FL 33971

Current Mailing Address: New Mailing Address:

4020 WINKLER AVE. 5202 5TH STREET WEST STE 204 LEHIGH ACRES, FL 33971 FT. MYERS, FL 33916

FEI Number: 03-0459454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TAX HOUSE CORPORATION 3929 N. FEDERAL HWY POMPANO BEACH, FL 33064

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIDECTORS

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SOUZA, VALDECIO SOUZA, VALDECIO Name: Name: 4020 WINKLER AVE. STE 204 5202 5TH STREET WEST Address: Address: City-St-Zip: FT. MYERS, FL 33916 City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: VP () Delete Title: VP (X) Change () Addition Name: SOUZA, SONIA M Name: SOUZA, SONIA M

 Name:
 SOUZA, SONIA M
 Name:
 SOUZA, SONIA M

 Address:
 4020 WINKLER AVE. STE 204
 Address:
 5202 5TH STREET WEST

 City-St-Zip:
 FORT MYERS, FL 33916
 City-St-Zip:
 LEHIGH ACRES, FL 33971

Title: T () Delete Title: T (X) Change () Addition

 Name:
 DE MATOS, OSEIAS
 Name:
 DE MATOS, OSEIAS

 Address:
 3214 3RD STREET W
 Address:
 5202 5TH STREET WEST

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:
 LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: VALDECIO SOUZA PD 07/05/2006