

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000038373

1. Entity Name

VALENCIA TRADING COMPANY



Principal Place of Business

201 S BISCAYNE BLVD STE 1500 LAD
MIAMI, FL 33131

Mailing Address

201 S BISCAYNE BLVD STE 1500 LAD
MIAMI, FL 33131

FILED
Sep 12, 2008 08:00 AM
Secretary of State



09102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1189756

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD STE 1500 LAD
MIAMI, FL 33131

**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 \$550.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HINESTROSA, LUIS
STREET ADDRESS 201 S BISCAYNE BLVD # 1500 LAD
CITY-ST-ZIP MIAMI, FL 33131

TITLE VGMS
NAME CALDERON, FERNANDO
STREET ADDRESS 201 S BISCAYNE BLVD # 1500 LAD
CITY-ST-ZIP MIAMI, FL 33131

TITLE FM
NAME PASCAZI, DOMINGO
STREET ADDRESS 201 S BISCAYNE BLVD # 1500 LAD
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000959561
09/12/08-80002-007 550.00

**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

9/10/08

Date

305-379-9114

Daytime Phone #