

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071675

Entity Name: VALENTE HOMES, INC.

FILED
Apr 22, 2004
Secretary of State

Current Principal Place of Business:

915 MIDDLE RIVER DR STE 410
FT LAUDERDALE, FL 33304

New Principal Place of Business:

PO BOX 832137
MIAMI, FL 332832137

Current Mailing Address:

P.O. BOX 832137
MIAMI, FL 332832137

New Mailing Address:

FEI Number: 20-0249347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPLETE CORPORATE SERVICES, INC.
915 MIDDLE RIVER DR STE 410
FT LAUDERDALE, FL 33304

Name and Address of New Registered Agent:

COMPLETE CORPORATE SERVICES, INC.
7730 SW 68 TR
MIAMI, FL 33143

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: ACHILLES BALLESTAS, PRESIDENT

04/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BALLESTAS, ACETILLES
Address: 915 MIDDLE RIVER DR STE 410
City-St-Zip: FT LAUDERDALE, FL 33304

Title: VD () Delete
Name: HOWARD, LLOYD
Address: 915 MIDDLE RIVER DR STE 410
City-St-Zip: FT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BALLESTAS, ACHIILLES
Address: PO BOX 832137
City-St-Zip: MIAMI, FL 332832137

Title: VD (X) Change () Addition
Name: HOWARD, LLOYD
Address: PO BOX 832137
City-St-Zip: MIAMI, FL 332832137

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: ACHILLES BALLESTAS

D

04/22/2004

Electronic Signature of Signing Officer or Director

Date