


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 8:00 am
Secretary of State

01-26-2006 90035 003 ***150.00

DOCUMENT # P05000012413	
1. Entity Name VALVIC VENTURES, INC.	

Principal Place of Business 15479 SW 32ND TERRACE MIAMI, FL 33185	Mailing Address 15479 SW 32ND TERRACE MIAMI, FL 33185
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2. Principal Place of Business 15571 SW 31 Lane	3. Mailing Address 15571 SW 31 Lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Miami FL	City & State Miami FL
Zip 33185	Country USA



01232006 Chg-P CR2E034 (11/05)

4. FEI Number 68-0601318	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent MANRESA VALLEDOR, ESTHER 15479 SW 32ND TERRACE MIAMI, FL 33185	
7. Name and Address of New Registered Agent MANRESA SAME Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MANRESA VALLEDOR, ESTHER L <input type="checkbox"/> Delete 15479 SW 32ND TERRACE MIAMI, FL 33185	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MANRESA Valledor Esther <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15571 SW 31 Lane MIAMI FL 33185
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V VALLEDOR, PETER L <input type="checkbox"/> Delete 15479 SW 32ND TERRACE MIAMI, FL 33185	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Valledor Peter L <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 15571 SW 31 Lane MIAMI FL 33185
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Esther Manresa Valledor **Esther Manresa Valledor** 1/23/05 (305) 2260942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #