

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 19, 2006 8:00 am
Secretary of State

04-25-2006 90105 029 ***150.00

DOCUMENT # P05000037749 1. Entity Name VALENTINA PRINTING, CORP.																															
Principal Place of Business 2095 NW 22ND COURT MIAMI, FL 33142		Mailing Address 2095 NW 22ND COURT MIAMI, FL 33142																													
2. Principal Place of Business 407 SW 12 AVE		3. Mailing Address 407 SW 12 AVE																													
Suite, Apt. #, etc. SUITE # C		Suite, Apt. #, etc. SUITE # C																													
City & State MIAMI, Florida		City & State MIAMI, FL 33130																													
Zip 33130		Zip 33130																													
Country USA		Country USA																													
6. Name and Address of Current Registered Agent VALIENTE, ANA M. 2095 NW 22ND COURT MIAMI, FL 33142		7. Name and Address of New Registered Agent Name Valiente, Ana M. Street Address (P.O. Box Number is Not Acceptable) 407 SW 12 AVE STE # C City MIAMI FL Zip Code 33130																													
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: <u><i>Valiente</i></u> (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. ☐ \$5.00 May Be Added to Fees																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY- ST- ZIP PVTD VALIENTE, ANA M 3403 SW 23 ST. MIAMI, FL 33145 </td> <td style="width: 50%; padding: 2px;"> ☐ Delete </td> <td style="width: 50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY- ST- ZIP </td> <td style="width: 50%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Delete</td><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Delete</td><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Delete</td><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Delete</td><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Delete</td><td style="padding: 2px;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td><td style="padding: 2px;">☐ Change ☐ Addition</td></tr> </table>				10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE NAME STREET ADDRESS CITY- ST- ZIP PVTD VALIENTE, ANA M 3403 SW 23 ST. MIAMI, FL 33145	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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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: <u><i>Valiente</i></u> 4/18/06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																															

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