2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071517

City-St-Zip:

HOMESTEAD, FL 33035

FILED Apr 04, 2006 Secretary of State

Entity Name: VALENTIN FARMS, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
1307 TOWHEE STREET HOMESTEAD, FL 33035				36100 S.W. 212 AVENUE FLORIDA CITY, FL 33034			
Current Mailing Address:				New Mailing Address:			
1307 TOWHEE STREET HOMESTEAD, FL 33035				36100 S.W. 212 AVENUE FLORIDA CITY, FL 33034			
FEI Number:		FEI Number Applied For (X)	FEI Nur	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
UY, VALENTIN 1307 TOWHEE STREET HOMESTEAD, FL 33035 US				UY, VALENTIN 36100 S.W. 212 AVENUE FLORIDA CITY, FL 33034 US			
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:				04/04/2006			
Electronic Signature of Registered Agent				Date			
Election Carr	paign Financing 1	rust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () D UY, VALENTIN 1307 TOWHEE S HOMESTEAD, FL	TREET		Title: Name: Address: City-St-Zip:		(X) Change ()Addition IN 212 AVENUE ITY, FL 33034	
Title: Name: Address: City-St-Zip:	D () D UY, SOAVRITHY 1307 TOWHEE S HOMESTEAD, FL	TREET		Title: Name: Address: City-St-Zip:		(X) Change ()Addition ITHY 212 AVENUE ITY, FL 33034	
Title: Name: Address:	D () D UY, SINOUN 1307 TOWHEE S	elete TREET		Title: Name: Address:	D UY, SINOUN 36100 S.W.	(X) Change()Addition I 212 AVENUE	

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.

City-St-Zip:

FLORIDA CITY, FL 33034

SIGNATURE: VALENTIN UY D 04/04/2006