2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144292

Title:

Name:

Address:

City-St-Zip:

(X) Delete

6104 WEEB ROAD APT 911

TAMPA, FL 33615 US

VALERO, HEBER

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
14111 VILLA TAMPA, FL	AGE TERRACE 33624 US	DR		
Current Mailing Address:		New Mailing Address:		
14111 VILLA TAMPA, FL	AGE TERRACE 33624 US	DR		
FEI Number:	20-3676320	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Add	Name and Address of New Registered Agent:	
AMARO, EL 14111 VILL TAMPA, FL	AGE TERRACE	DR		
·	33024 03			
The above in the State	named entity sub	omits this statement for the pu	rpose of changing its reg	istered office or registered agent, or both,
The above in the State	named entity sub of Florida. E:	·		istered office or registered agent, or both,
in the State SIGNATUR	named entity sub of Florida. E: Electronic	Signature of Registered Ager		istered office or registered agent, or both, Date
in the State SIGNATUR	named entity sub of Florida. E: Electronic	·		
in the State SIGNATUR Election Cam	named entity sub of Florida. E: Electronic	Signature of Registered Ager	ıt	
in the State SIGNATUR Election Cam	named entity sub of Florida. E: Electronic paign Financing Ti	Signature of Registered Agerrust Fund Contribution (). PRS: Elete	ıt	Date Date

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ELIA AMARO PD 04/30/2008

() Change () Addition