

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146816

Entity Name: VALUE FINANCIAL GROUP INC.

FILED
May 17, 2006
Secretary of State

Current Principal Place of Business:

1068 SUNSET STRIP
SUNRISE, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

1068 SUNSET STRIP
SUNRISE, FL 33313 US

New Mailing Address:

FEI Number: 57-1226150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIDAS, STEVEN
4540 NW 36TH STREET
APT 104
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PIERRE, SYLVANIE J
Address: 807 NW 24 STREET APT 4
City-St-Zip: WILTON MANOR, FL 33311 US

Title: D () Delete
Name: PROSPER, STENOR
Address: 2550 NW 56 AVE APT B105
City-St-Zip: LAUDERHILL, FL 33313 US

Title: P () Delete
Name: TIDAS, STEVEN
Address: 4540 NW 36TH STREET APT 104
City-St-Zip: LAUDERDALE LAKES, FL 33319 US

Title: VP () Delete
Name: SMITH, DORLUS
Address: 2750 NW 44 STREET APT 113
City-St-Zip: OAKLAND PARK, FL 33309 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: STEVEN TIDAS

PS

05/17/2006

Electronic Signature of Signing Officer or Director

Date