2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# P06000028765

Entity Name: VAL-U-KING, INC.

Current Principal Place of Business:

201 S. CHARLESTON AVENUE
FORT MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

201 S. CHARLESTON AVENUE
FORT MEADE, FL 33841

New Mailing Address:

FEI Number: 20-4661601 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

IQBAL, MOHAMED
201 S. CHARLESTON AVENUE
FORT MEADE, FL 33841 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: PD ( ) Delete
Name: IQBAL, MOHAMED
Address: 3452 SUWANNEE STREET
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: SD ( ) Delete
Name: SULTANA, ROKSANA
Address: 3452 SUWANNEE STREET
City-St-Zip: ZOLFO SPRINGS, FL 33890

Title: VD ( ) Delete
Name: THAKUR, ANAYET U
Address: 9129 PASEO DE VALENCIA STREET
City-St-Zip: FORT MYERS, FL 33908

Title: TD ( ) Delete
Name: SIDDIKA, AYESHA
Address: 9129 PASEO DE VALENCIA STREET
City-St-Zip: FORT MYERS, FL 33908

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 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: ANAYET U THAKUR VD 02/05/2009

Electronic Signature of Signing Officer or Director — Date