

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 08:00 A
Secretary of State

DOCUMENT # P06000086015

1. Entity Name
VALPRO EQUIPMENT VALIDATION SERVICES, INC.



Principal Place of Business

C/O MARK A. TINGLER
11448 41 COURT NORTH
ROYAL PALM BEACH, FL 33411

Mailing Address

C/O MARK A. TINGLER
11448 41 COURT NORTH
ROYAL PALM BEACH, FL 33411



03222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0590054

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TINGLER, MARK A
11448 41ST COURT NORTH
ROYAL PALM BEACH, FL 33411

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000870508
04/09/08-80095-003 158.75

10. OFFICERS AND DIRECTORS

TITLE PD
NAME TINGLER, MARK A
STREET ADDRESS 11448 41 COURT NORTH
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

TITLE ST
NAME TINGLER, ELAINE M
STREET ADDRESS 11448 41ST CT N
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411

TITLE
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CITY-ST-ZIP

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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: *Elaine M. Tinger* Elaine M. Tinger Secy/Treas 3-24-08 561-876-2267
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #