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2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P06000094988**

1. Entity Name  
**VALKO GROUP CORP.**

Principal Place of Business  
**18071 BISCAYNE BLVD. #301  
AVENTURA, FL 33160**

Mailing Address  
**18071 BISCAYNE BLVD. #301  
AVENTURA, FL 33160**

2. Principal Place of Business - No P.O. Box #  
3. Mailing Address

Suite, Apt. #, etc.  
City & State  
Zip Country

4. 201 Number  
**26-0283117**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**VALENTE, CLAUDIO O  
18071 BISCAYNE BLVD. #301  
AVENTURA, FL 33160**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
<input type="checkbox"/> Delete	VALENTE, CLAUDIO O	18071 BISCAYNE BLVD. #301	AVENTURA, FL 33160	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete	VALENTE, GISELA S	18071 BISCAYNE BLVD. #301	AVENTURA, FL 33160	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 has 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 the 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, in a letter that empowered.

SIGNATURE: GISELA S VALENTE 4/25/07