2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000124333

Entity Name: VALCA SERVICES INC

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5325 KEENES PHEASANT DRIVE 7335 MILLSTONE ST. WINDERMERE, FL 34786 WINDERMERE, FL 34786

Current Mailing Address: New Mailing Address:

5325 KEENES PHEASANT DRIVE 7335 MILLSTONE ST. WINDERMERE, FL 34786 WINDERMERE, FL 34786

FEI Number: 20-5927962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NAVAS, EDGAR L P 5325 KEENES PHEASANT DRIVE 7335 MILLSTONE ST WINDERMERE, FL 34786 US WINDERMERE, FL 34786 US

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: EDGAR NAVAS 04/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 NAVAS, EDGAR L
 Name:
 NAVAS, EDGAR L

 Address:
 5325 KEENES PHEASANT DRIVE
 Address:
 7335 MILLSTONE ST

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 WINDERMERE, FL 34786

 Name:
 ECHEVARRIA, IVETTE
 Name:
 ECHEVARRIA, IVETTE

 Address:
 5325 KEENES PHEASANT DRIVE
 Address:
 7335 MILLSTONE ST

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 WINDERMERE, FL 34786

Title: () Delete Title: T () Change (X) Addition

 Name:
 Name:
 ARIAS, CESAR

 Address:
 Address:
 7335 MILLSTONE ST

 City-St-Zip:
 City-St-Zip:
 WINDERMERE, FL 34786

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 GARCIA, ALBERTO

 Address:
 Address:
 7335 MILLSTONE

 City-St-Zip:
 City-St-Zip:
 WINDERMERE, FL 34786

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: EDGAR NAVAS P 04/02/2009