## 2008 FOR PROFIT CORPORATION ANNUAL REPORT,

## FILED Apr 11, 2008 8:00 am Secretary of State

03-24-2008 90044 016 \*\*\*150 00

DOCUMENT # P07000031759  1. Entity Name VALID M SERVICES INC						03-24-2006	3 90044 016 ***	130.00
Principal Plac	e of Business	Mailing Address						
10810 S₩ 25 ST		10810 SW 25 ST				000	00154	
MIAMI, FL 33165		MIAMI, FL 33165			,   '	660	06437	
					. I manan			FRANZER IN 1983
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite. Apt. #, etc.			03172008	Chg-P	CR2E034 (12/0	6)
City & State		City & State			4. FEI Numb	20-86186	10	Applied For Not Applicable
Zip	Country	Zip	Zip Country			of Status Desired	□ \$8.75 A Fee Requ	
<u> </u>	6. Name and Address of Curren	t Registered Agent		******	7. Name and	Address of New Ro	egistered Agent	
VALIDO, MAURICIO			Į.	Name				
10810 SW	/ 25 ST		[	Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI, FL	33165		İ				<del></del>	
		1			·			
		1.		City	•		FL Zip Ci	ode
8. The above the obligat SIGNATURE.	named entity submits this statement idons of registered agent.  LULL  Signature, hjoed or pulsipal name of registered agent.				_		rida. Fam familiar wi	
FILE NOWIL: FEE IS \$150.00  After May 1, 2098 Fee will be \$550.00  9. Election Campaign Trust Fund Contribu				s to fine a military and said	puired when reinstating)		CATE	
		9. Election Campa	ign Financ	cing	\$5.00 May Be Added to Fees		DATE	<u>.</u>
After M	ay 1, 2098 Fee will be \$550 OFFICERS AND	9. Election Campa Trust Fund Cont	ign Financ	cing	\$5.00 May Be Added to Fees		CERS AND DIRECTO	RS IN 11
After M: 10.	ay 1, 2008 Fee will be \$550 OFFICERS AND	9. Election Campa Trust Fund Cont	rign Finance tribution.	cing .	\$5.00 May Be Added to Fees		CERS AND DIRECTO	***
After M	ay 1, 2098 Fee will be \$550 OFFICERS AND	9. Election Campa Trust Fund Cont	tribution.	cing .	\$5.00 May Be Added to Fees			***
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After Mi	P VALIDO, MAURICIO 10810 SW 25 ST.	9. Election Campa Trust Fund Cont	11. TITLE NAME STREE	CT ADDRESS ST-ZIP	\$5.00 May Be Added to Fees		Change	Addition
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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 occiver 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:

H. M.

NATURE AND TYPED OR PROTED MAKE OF BIOMONG OFFICER OR OWINGTON

U3.17.08 (205) 798-5037

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