

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117772

Entity Name: VALDES & WILLSON, INC.

FILED
Mar 12, 2008
Secretary of State

Current Principal Place of Business:

6278 N. FEDERAL HWY
SUITE 490
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6278 N. FEDERAL HWY
SUITE 490
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 26-1321708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLSON, ELFRIEDE
6278 N. FEDERAL HWY
SUITE 490
FORT LAUDERDALE, FL 33308 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: D () Delete
Name: WILLSON, ELFRIEDE
Address: 210 SE 6TH COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: VALDES, TERESA
Address: 5731 NW 61 PLACE
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLSON, ELFRIEDE
Address: 3229 S. PORT ROYALE DR APT 29I
City-St-Zip: FT. LAUDERDALE, FL 33308

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: ELFRIEDE WILLSON

D

03/12/2008

Electronic Signature of Signing Officer or Director

Date