

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra R. Michalek  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000072022 (5)

1. Corporation Name

VALCORP CAPITAL MANAGEMENT, INC.

Principal Place of Business

9940 SW 59TH AVE.  
MIAMI FL 33156

Mailing Address

9940 SW 59TH AVE.  
MIAMI FL 33156



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MERKIN, STEWART A  
444 BRICKELL AVE  
RIVERGATE PLAZA SUITE 300  
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1808, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0905, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Current Registered Agent

Signature of Registered Agent or Current Registered Agent

Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
DPST  
GARDANO, ENRIQUE  
9940 SW 59TH AVE.  
MIAMI FL 33156

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

44

45

46

47

48

49

50

14. I do hereby certify that the information supplied by this filing is voluntary, true and correct and does not omit any material information. I further certify that the information indicates I am the registered agent or director of the corporation or the officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Enrique Gardano

3/12/96

(305) 376-8364

CR2E034 (12/95)