FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000000489 (1)

VAL-ENTAPRISES, INC.

Principal Place of	Business	

FILED Apr 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				- C SEDITORI TO TOTAL BULLI BASIN BOTH DON'T BOTH BOSH BASIN DIORI SALLA YAN TODA						
8618 FÖROHAM ST FT MYERS FL 33907		8618 FOROHAM ST FT MYERS FL 33907-4320	8618 FOROHAM ST FT MYERS FL 33907-4320							
						3. Date Incorporated or Qualified 01/03/1995		te of Last 8/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26	·	_		65-0553479	·	 , 	Not Applicab	ole
Suite, Apt.		Suite, Apt #, etc.			····	5. Certificate of Status Desired		Fee	5 Additional Required	
City & Stat 23		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Ζip	Country	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,					
24	25 9. Name and Address of Curr	29	30			Florida Statutes 10. Name and Address of New Reg	Yes [
1/41 6	_ 	ent Negistered Agent	~	81	Name	ID. Itame and Address of New Hel	istered s	(April		\dashv
	ENTA, LINDA J									
	FOROHAM ST IYERS FL 33907			62	Street Add	Bress (P.O. Box Number is Not Acceptab	le) 			
				83						Į.
				84	City		FL		ip Code	
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the obl	te of Florida. Such change was	authorized	o by	the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of tithe appo	changing pintment i	j its registere as registered	ď
SIGNATURE	Signature, typed or printed name of registered is	agent and little if applicable (NO	fit Angistered	J Age	nt signature requ	Fred when reinstaling)	DATE			-
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			01 60 6
TITLE	P	☐ DELETE	1.110	ΙLΕ				L Chang	e 📙 Addilio	
NAME	VALENTA, LINDA J		1.2 NA							F034
STREET ADDRESS	8618 FOROHAM ST		1.3 ST	REET.	ADDRESS					Įμ̈́
CITY-ST-ZIP	FT MYERS FL 33907	DC) F1c	140		T-ZIP			Chang	o Addit	
TITLE	VALENTA DODERT I	☐ DELETE 21 TIT			l l			L_ Ghang	je Li Addite	311
NAME ATRICT ADDRESS	VALENTA, ROBERT J 8618 FOROHAM ST		2.2 N/		1000000					
STREET ADDRESS	FT MYERS FL 33907				ADDRESS					ļ
CITY-ST-ZIP TITLE	TI MILNO IL 00801	DELETE	2. 4 C 3.1 TI		1-211/	· · · · · · · · · · · · · · · · · · ·		☐ Change	e Additio	on
NAME			3.2 N/		}					Ì
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3.4. C							}
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NAME			4. 2 N	AME.						
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CITY-ST-ZIP			4.4.01	TY-\$1	I-ZIP					
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NAME			5.2 NA	ME	ļ					
STREET ADDRESS			5.3 \$1	REET.	ADDRESS					
CITY-ST-ZIP		·	5.4 GI	1Y-S1	I · ZIP					
TITLE		DELETE	6.1 TI	ΙLF				Change	e 🔲 Additio	on
NAME			62 N/	ME	İ					
STREET ADDRESS			6.3 \$1	REE1.	ADDRESS					
CITY-ST-ZIP			6.4 CI	1y - 51	I - ZIP					_

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 corporation or the receiver 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.