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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P9500068121 (9)

VAL-TECH HOMES, INC.

Principal Place of Business Mailing Address										
826 ELDARADO AVENUE 926 ELDARADO AVEN CLEARWATER BEACH FL 34630 CLEARWATER BEACH										
						3. Date Incorporated or Qualified 08/31/1995	3a. Date 05/01		eport	
	Place of Business	2a, Mailing Address				4, FEI Number		Ap	plied For	
21		26				59-3336020		No	ot Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Star	te	City & State			6. Election Campaign Financing \$5.00 May Be					
23		28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Count	try		8. This corporation has liability for it	yangible ta	x under s	. 199.032,	
24	25	29	30			Florida Statutes	Yes	٠.		
Name and Address of Current Registered Agent						10. Name and Address of New Reg	Istered Ay	ent		
GARCIA, CEASAR B					Name					
926 ELDARADO AVENUE CLEARWATER BEACH FL 34630			8	12	Street Addre	ress (P.O. Box Number is Not Acceptable)				
			8	3						
					City FL 85 Zip Code					
office or agent 14 SIGNATURE	registered agent or both, in the Stat ani fari-liar with, and accept the obti Signature, typed or printed name of registered a	gations of, Section 607.0505, I	Florida Statut	tes		on's board of directors. I hereby accept	the appoir	ntment as	registered	
12.	444 Mark Agent Control of the Contro					ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR	S IN 12	
TITLE	D	DELETE	13.					Change	Addition	
NAME	GARCIA, CEASAR B		1.2 NAM	1.2 NAME				•	_	
STREET ADDRESS	926 ELDARADO AVENUE		1.3 STRE	FFT I	ADDRESS					
CITY-ST-ZIP	CLEARWATER BEACH FL 34	630	1.4 CITY - ST - ZIP							
TITLE	DELETE			[	***		L	Change	Addition	
NAME			2.2 NAM	IE				-		
STREET ADDRESS	5			2.3 STREET ADDRESS						
CITY-ST-ZP				2. 4 CITY-ST-ZIP						
THILE				3.1 TITLE				Change	Addition	
NAME	3.2			3.2 NAME			<del>, _</del>	-		
STREET ADDRESS				3.3 STREET ADDRESS						
CITY-ST-ZIP				3.4. CITY-ST-ZIP						
TITLE				4.1 TITLE				Change	Addition	
NAME				иE	İ			-	_	
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP					r-ZiP					
TITLE	DELETE 5.1							Change	Addition	
NAME	52						_	_ •		

14. I do hereby certify that the information supplied with this filing 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 13 or Block 13 if changed, or an attachment with an address.

5.3 STREET ADDRESS

6 3 STREET ADDRESS 6 4 City-St-Zip

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

X-1397

<u>447-436</u> Daytime Phone ▶

\_\_ Change \_\_\_ Addition

**FILED** 

Jan 21 1997 8:00am

Secretary of State