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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000094675

1. Corporation Name

## Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90057 034 \*\*\*150.00

	-VALDEHHAMA, INC.					•							
Principal Place	e of Business	Mailir	ng Address					1 18811881 1		2011; 2511 <b>25</b> 110	· = 411 <b>- 1110 - 6</b> 11	** ***** *** ****	
12960 SW 103RD TERRACE			12960 SW 103RD TERRACE										
MIAMI FL 33186			MIAMI FL 33186					DO NOT WRITE IN THIS SPACE					
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							3.	12/11/199		•			
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Suite, Apt.	#. etc.		ūite, Apt. #,	etc.				Certificate of			\$8.75	Additional	1
22			27					Certificate of a	Status Desired		· Fee i	Required	_
City & State			City & State					. Election Cam	paign Financin	9 🗆	\$5.0	May Be	
23		28						Trust Fund C	ontribution	<u> </u>	Adde	to Fees	_
Zip	Country	Zi	ip	_	Country		8	. This corporati	ion owes the cu	ırrent year Int		_	
24	25	29		30				Personal Proj			☐ Yes	□No	4
	9. Name and Address of Current	t Register	red Agent			<del></del>	10	Name and A	ddress of Nev	Registered	Agent		-
VALE	DERRAMA, CONCEPCION				81	Name							}
	SO SW 103RD TERRACE				82	Street Ad	dress (	P.O. Box Numb	er is Not Acce	ptable)			7
	MI FL 33186				-	ļ <u> </u>							-
MIN	MI FL 33 100				83								
					84	City					85 Zij	Code	1
										<u>FL</u>	<u> </u>		
11. Pursuant	to the provisions of Sections 607.0304	z and our.	. I SUB, FIONG	a Statutes, t	TIE SPOA	e-nameu co		ni submits tins	statement for ti	io bai boac oi		:'-X J	-
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CITY-ST-ZIP 14. I 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 hister 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, of on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

aldwarauRED