

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000086136 (4)

1. Corporation Name
VALEN-TRADE, INC.

Principal Place of Business

8045 NORTHWEST 36TH STREET, SUITE 506A
MIAMI FL 33166

Mailing Address

8045 NORTHWEST 36TH STREET, SUITE 506A
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 8341NW 64TH ST	26 8341NW 64TH ST
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 MIAMI-FL	28 MIAMI-FL
24 33166	29 33166
25 Country	30 Country

3. Date Incorporated or Qualified	Applied For
10/17/1996	Not Applicable
4. FEI Number	Applied For
65-0702512	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	Yes No

9. Name and Address of Current Registered Agent

RONDON, LEANDRO B
8045 NW 36TH ST
STE 506A
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name	RONDON, LEANDRO B.
82 Street Address (P.O. Box Number is Not Acceptable)	8341NW 64TH ST
83	
84 City	MIAMI
85 State	FL
86 Zip Code	33166

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-27-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	GOLDING, ADOLFO CARRIZO	1.2 NAME	GOLDING, ADOLFO CARRIZO
STREET ADDRESS	8045 NORTHWEST 36TH STREET, SUITE 506A	1.3 STREET ADDRESS	8341NW 64TH ST
CITY-ST-ZIP	MIAMI FL 33166	1.4 CITY-ST-ZIP	MIAMI FL 33166
TITLE	VSTD	2.1 TITLE	VSTD
NAME	RONDON, LEANDRO B	2.2 NAME	RONDON, LEANDRO
STREET ADDRESS	8045 NORTHWEST 36TH STREET, SUITE 506A	2.3 STREET ADDRESS	8341NW 64TH ST
CITY-ST-ZIP	MIAMI FL 33166	2.4 CITY-ST-ZIP	MIAMI FL 33166
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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:

4-27-98

CR2E034 (10/97)