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

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000015281

1. Corporation Name

VALENTIN-ROTARU, INC.

## May 06, 1999 8:00 am Secretary of State

05-06-1999 90251 005 \*\*\*150.00



Principal Place	MIN SERVICES IN							
Principal Place of Business Mailing Address  1967 SE 17TH CT POMPANO BEACH FL 33062 US  Mailing Address  1967 SE 17TH CT POMPANO BEACH FL 33062 US						DO NOT WRITE IN TH	IIS SPACE	
						3. Date Incorporated or Qualified		
						02/17/1997		
Principal Place of Business     2a. Mailing Address						4. FEI Number	Ar	plied For
21 26						65-0733116	<del></del>	ot Applicable
Suite, Apt. #, etc.						5Certifcate of Status Desired		Additional
27				<del></del>		<u> </u>		equired
City & State	28					6. Election Campaign Financing Trust Fund Contribution	•	May Be to Fees
—₁ Zip	Country	Zip Cou				8. This corporation owes the current year intangible  Personal Property Tax  Yes  No		
24	25 25 Common Address of Common	<del></del>	30			Personal Property Tax.  10. Name and Address of New Registers		
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registers	u Agent	
ROTARU, VALENTIN								
1967 SE 17TH CT				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 208				83			<del></del>	
POM	PANO BEACH FL 33062		i					
				84	City	F	L 85 Zip	Code
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized rida Stati	ibyth ⊔tes	ne corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the appropriate the properties of the proper	of changing its pointment as re	registered egistered
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Agonte	angination or ordered	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
TITLE	D	☐ DELETE	1.1 71	TLE			Change	☐ Addition
NAME	ROTARU, VALENTIN		1.2 NA	ME				
STREET ADDRESS	4007 OF 4771 OT			REETA	LODRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33062		1.4 CF	TY-ST-	ZIP			
TITLE		☐ DELETE	2.1 ∏	ΓLE	•		Change	Addition
NAME			2.2 NA	ME				
STREET ADDRESS			2.3 ST	REETA	DDRESS			
CITY-SI-ZIP-				2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 Tr				Change	☐ Addition
NAME			3.2 NA		Ì			}
STREET ADDRESS			- 1		ADDRESS			
CITY-ST-ZIP		☐ DELETE		TY-ST-	ZUP		☐ Change	Addition
TITLE		[1] DELETE	4.1 11				onlarige	Addition
NAME			4. 2 N	_	, DDDCCC			- }
STREET ADDRESS					VDDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CI	TY-ST-	ZIP		☐ Change	Addition
NAME		تا محددات	5.2 NA					_
STREET ADDRESS			5.3 ST	REETA	ODRESS			(
CITY-ST-ZIP			5 4 CT	TY-ST-	ZIP			
TITLE		DELETE	6.1 TIT				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REETA	UDDRESS			
Crry-ST-ZIP			64 CI	TY-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, group at attachment with an address, with all other like empowered. Services INC.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR