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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000020202 (2)

VALLADARES ENTERPRISE, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 232 LIDO DRIVE 232 LIDO DRIVE **PUNTA GORDA FL 33950** PUNTA GORDA FL 33950 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/05/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ABBOTT, ELIOT C 201 S BISCAYNE BLVD STE 1970 82 Street Add **MIAMI FL 33131** 63 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this summent 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 amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. We Home MIKE ITUKNEK Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE ★ Change ___ Addition 1.1 TITLE RIVERO, JEANETTE 1.2 NAME VALLADARES JEANETTE CR2E034 232 LIDO DRIVE STREET ADDRESS 1.3 STREET ADORESS 227 TAYLOR ST PUNTA GORDA FL 33950 CITY-ST-ZIP 1.4 CITY - ST - ZIP DUNTA GORDA □ DELETE **X** Addition TITLE 21 TITLE NAME 2.2 NAME VALLADAROS BLANCA DIT TAYLOR ST. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DUNTA GORDA Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME VALLADAROS, IVETTE STREET ADDRESS 3.3 STREET ADDRESS 227 TAYLO'R ST PUNTA GORDA CITY-ST-ZIP 3.4 CITY-ST-7/P DELETE TITLE 4.1 TITLE X Addition 4.2 NAME ACHKAR, ANIN STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-2IP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 trusted 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.

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