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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027285 (0)

THE VALENCIA CORPORATION

Principal Place of Business Mailing Address 1713 MARTINSVILLE COURT 1713 MARTINSVILLE COURT ORLANDO FL 32825 ORLANDO FL 32825 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/19/1997 2a. Mailing Address 2. Principal Place of Business 4. FE Applied For 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDEZ, JUAN 1713 MARTINSVILLE COURT 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32825 83 64 Zip Code 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 protect name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE President 1.1 TOLE Change Addition Juan F. Fernandez NAME 1.2 NAME 1713 MARTINGUILLE COUPT STREET ADDRESS 1.3 STREET ADDRESS OPLANDO, PL 32825 CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE TITLE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CRTY-ST-7IP 3.4. C(1Y-S1-Z(P DELFTE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this fining does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this arrural report or supplemental arrural report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the composition or the decement of the endowed do to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or un attackment with an address?

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELFTE

CICALATURE.

TITLE

NAME

THILE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (10/97)

Change

200002557**16** -06/11/38--01089--0**4**1

***150.00

Addition

Addition

FILED

Jun 10 1998 8:00am

Secretary of State