2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000093788

1. Entity Name

VALUE EQUITIES INCORPORATED

Principal Place of Business	Mailing Address
7430 138TH STREET NORTH SEMINOLE, FL 33776	PO BOX 8403 SEMINOLE, FL 33775

DO NOT WRITE IN THIS SPACE

01042007   No Cha-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-3480051		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MILLS, LINDA
7430 138TH STREET NORTH
SEMINOLE, FL 33776

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2007 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	

10.	OFFICERS AND DIRECTORS	
TITLE	D	
NAME	MILLS, LINDA	
STREET ADDRESS	7430 - 138TH ST N	
CITY-ST-ZIP	SEMINOLE, FL 33776	
TITLE		
NAME		
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05/09/07-80008-014 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Linda Mill - LINDA Mills_   4-17-07   727-895-6655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #