2004 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZP

SIGNATURE:

Apr 05, 2004 08:00 AM DOCUMENT # P99000014233 Secretary of State VALWAY REAL ESTATE CORP. Principal Place of Business Mailing Address 15 F. SOUTHPORT LANE 15 F. SOUTHPORT LANE **BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33436** 04012004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0934506 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent VALLELY, JOHN DO NOT WRITE 15 F. SOUTHPORT LANE BOYNTON BEACH, FL 33436 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE VALLELY, JOHN NAME 15 F. SOUTHPORT LANE STREET ADDRESS U00000103537 04/05/04-80060-011 150.00 CITY-ST-ZIP BOYNTON BEACH, FL 33436 TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE RAME STREET ADDRESS CITY-ST-ZIP TTE:E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby 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 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 charged, or on an attackment with an address, with all other like empowered.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED