

2000 UNIFORM BUSINESS REPORT (UBR)

6/27/00

05-JUN-2000 90104011 ***150.00

DOCUMENT # F99000081974

Entity Name

VALMON OF FLORIDA, INC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 JUN 27 PM 2:29

Principal Place of Business		Mailing Address	
3400 SOUTH GALT OCEAN DRIVE #1710 FORT LAUDERDALE, FL 33308			
Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEE Number 59-3604924	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$0.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LUIS ALBERTO VALENCIA 3400 SOUTH GALT OCEAN DR #1710 FORT LAUDERDALE, FL 33308		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Designated Agent signature required when requalifying)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (SEE 11)	
☐ Delete PSD LUIS ALBERTO VALENCIA 3400 S. GALT OCEAN DR #1710 FT LAUDERDALE, FL 33308	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* PRESIDENT 3/31/00 9914845533

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