2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S20246

Address:

City-St-Zip:

9233 CORAL ISLE WAY

FT MYERS, FL

Entity Name: VALUCOMP, INC.

FILED Mar 12, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	KLER ROAD				
SUITE 216 FT. MYER	S, FL 33919	US			
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
6719 WINI SUITE 216	KLER ROAD				
	S, FL 33919	US			
FEI Number:	: 65-0235176	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address of	New Registered Agent:	
9233 COR	CATHERINE E AL ISLE WAY S, FL 33919				
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
		o satisfy its Intangible Tax filing red g Trust Fund Contribution ().	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTS (STOKES, CATH 9233 CORAL IS FT MYERS, FL	SLE WAY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	DV (STOKES, EAR) Delete L R K,	Title: Name:	() Change() Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: E.R.K.STOKES DV 03/12/2002