## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000134576

Entity Name: UWALKTHEMALL INC.

Address:

City-St-Zip:

3136 S.E. 16TH PLACE

CAPE CORAL, FL 33904

FILED Apr 27, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3136 S.E. 16TH PLACE CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 3136 S.E. 16TH PLACE CAPE CORAL, FL 33904 FEI Number: 20-5761214 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COGGINS, SHARNA A 2306 CHRISTOPHER AVE LEHIGH ACRES, FL 33971 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SERVIS, KAREN L Name: Name: 3136 S.E. 16TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: VΡ Title: ( ) Delete () Change () Addition SERVIS, MARK D Name: Name: 3136 S.E. 16TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: Title: ( ) Delete () Change () Addition SERVIS, MARK D Name: Name: 3136 S.E. 16TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: () Delete Title: () Change () Addition SERVIS, KAREN L Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: KAREN SERVIS P 04/27/2008