# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H75611

**Entity Name:** WALMONT EXPORT & IMPORT INC.

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 11104 S.W. 139TH CT.<br>MIAMI, FL 33186 | 11104 S.W. 139TH CT.<br>MIAMI, FL 33186 US |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 11104 S.W. 139TH CT.<br>MIAMI, FL 33186 | 11104 S.W. 139TH CT.<br>MIAMI, FL 33186 US |

FEI Number: 59-2610878     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:** |
|---|---|
| MARCIA M. WALLACE<br>11104 S.W. 139 CT<br>MIAMI, FL 33186    US | WALLACE, MARCIA<br>11104 S.W. 139 CT<br>MIAMI, FL 33186    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:  MARCIA WALLACE                                      03/14/2011

        Electronic Signature of Registered Agent                                      Date

## OFFICERS AND DIRECTORS:

Title:        PD
Name:        WALLACE, MARCIA
Address:      11104 SW 139 CT
City-St-Zip:  MIAMI, FL  33186 US

Title:        VP
Name:        WALLACE, MARCIA L
Address:      9530 SW 148 PLACE
City-St-Zip:  MIAMI, FL  33196 US

Title:        PD
Name:        WALLACE, MARCIA
Address:      11104 SW 139TH CT
City-St-Zip:  MIAMI, FL  33186 US

Title:        PD
Name:        WALLACE, MARCIA
Address:      11104 SW 139TH CT
City-St-Zip:  MIAMI, FL  33186-325 US

Title:        PD
Name:        WALLACE, MARCIA
Address:      11104 SW 139TH CT
City-St-Zip:  MIAMI, FL  33186 US

Title:        PD
Name:        WALLACE, MARCIA
Address:      11104 SW 139TH CT
City-St-Zip:  MIAMI, FL  33186 US

I hereby 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 all other like empowered.

SIGNATURE:  MARCIA M WALLACE                              PD                    03/14/2011

        Electronic Signature of Signing Officer or Director                                      Date