2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

Jan 31, 2005 08:00 AM **DOCUMENT # P00000023199 Secretary of State** 1. Entity Name MIAMI WALLUNIT GROUP, INC. Principal Place of Business Mailing Address 1585 EAST 11TH AVENUE 1585 EAST 11TH AVENUE HIALEAH, FL 33010 HIALEAH, FL 33010 01132005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1032057 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORREDOR, PABLO E DO NOT WRITE 1585 EAST 11TH AVENUE HIALEAH, FL 33010 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PVST TITLE CORREDOR, PABLO E NAME STREET ADDRESS 1585 EAST 11TH AVENUE CITY-ST-ZIP HIALEAH, FL 33010 U00000206306 02/01/05-80022-024 158.75 TITLE CORREDOR PARLO E NAME STREET ADDRESS 1585 EAST 11TH AVENUE HIALEAH, FL 33010 CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AUDRESS CITY~ST-ZIP 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 feeps 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 of 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 changed, or on an attachment with an address, with all alter like empowered.

BINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED