

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90256 035 ***150.00

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1. Entity Name
THE WALL MANAGEMENT, CORP.



Principal Place of Business
**220 71ST ST., STE. 207
MIAMI BEACH, FL 33141**

Mailing Address
**220 71ST ST., STE. 207
MIAMI BEACH, FL 33141**

50041865



03182005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0990832

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DE-LUIZ, ORLANDO
1615 WEST AVE #204
MIAMI BEACH, FL 33139**

7. Name and Address of New Registered Agent

Name **De-Luiz, Orlando**

Street Address (P.O. Box Number is Not Acceptable)

5161 Collins Ave # 706

City **Miami Beach**

FL

Zip Code **33140**

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 **Orlando De Luiz** **04/19/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ORLANDO, DE-LUIZ 1615 WEST AVENUE 204 MIAMI BEACH, FL 33139	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DE-FREITAS, CELSO R 7945 CARLYLE AVE #08 MIAMI BEACH, FL 33141	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS D De-LUIZ, ORLANDO 5161 COLLINS AVE # 706 MIAMI BEACH, FL 33140	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT D DE-FREITAS, CELSO R 6969 COLLINS AVE # 709 MIAMI BEACH, FL 33141	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 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 liquidator 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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Celso De Freitas **04/19/05** **3058658180**

Date

Daytime Phone #