## 2005 FOR PROFIT CORPORATION

**FILED** Apr 07, 2005 08:00 AM

	REPORT		- <b>C</b>	ecretary of State
<b>DOCUMENT # P00000073</b>	065		5	ecretary of State
Entity Name     W.A.L, ENTERPRISES, INC.				
VIII.L., LIVICIA MOLO, MO.				
Principal Place of Business	Mailing Address			•
1243 AVONDALE LANE	1243 AVONDALE LANE			
WEST PALM BEACH, FL 33409	WEST PALM BEACH, FL 33409	•		
DO NOT WRITE	INI THIS SEA	E	04042005 No Chg-F	
DO NOT WITH L			4. FEI Number 65-1070556	Applied For Not Applicable
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6. Name and Address of Current F	legistered Agent	in the second se	Makemeria in the	
IVESTER, HEATHER R		AMERICAN STATE	DO NOT	White
1243 AVONDALE LANE		Islandings (	DO NOT	AN LOT I E
WEST PALM BEACH, FL 33409			IN THIS S	SPACE
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The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its registere	ed office or registers	ed agent, or both, in the State	of Florida. I am familiar with, and accept
the obligations of registered agent.	_	ed office or registers	ed agent, or both, in the State	
	_	ed affice or registers		of Florida. I am familiar with, and accept  DATE
the obligations of registered agent.	nd title if applicable. (NOTE: Registered	d Agent signature required		
the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent a	9. Election Campaign Finan Trust Fund Contribution.	d Agent signature required	when reinstaling)	
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12. Thereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 trusteg 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.

TITLE MAME STREET ADDRESS

AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR