

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095456

Entity Name: WAL-GATES, INC.

FILED
May 30, 2006
Secretary of State

Current Principal Place of Business:

2221 N.E. 164TH ST.
#296
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

1034 N.E 209 TERRACE
MIAMI, FL 33179 US

New Mailing Address:

2221 N.E 164TH STREET
296
N. MIAMI BEACH, FL 33160 US

FEI Number: 33-1030507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DESPEINES, WALLACE O CP
1034 N.E 209 TERRACE
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

DESPEINES, WALLACE O CP
2221 N.E 164TH STREET
296
N. MIAMI BEACH, FL 33160 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:

05/30/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: DESPEINES, WALLACE O
Address: 1034 NE 209 TERR
City-St-Zip: MIAMI, FL 33179

Title: CEO () Delete
Name: DESPEINES, WALLACE O
Address: 1034 NE 209 TERR
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: DESPEINES, WALLACE O
Address: 2221 N.E 164TH STREET # 296
City-St-Zip: N. MIAMI BEACH, FL 33160

Title: VP (X) Change () Addition
Name: HILAIRE, JOSEPH A
Address: 2221 N.E 164TH STREET # 296
City-St-Zip: N. MIAMI BEACH, FL 33160

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

SIGNATURE: WALLACE O. DESPEINES

CP

05/30/2006

Electronic Signature of Signing Officer or Director

Date