

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000095456

FILED
May 01, 2003
Secretary of State

Entity Name: WAL-GATES, INC.

Current Principal Place of Business:

1034 NE 209 TERR
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 600176
N. MIAMI BEACH, FL 331600176

New Mailing Address:

FEI Number: 33-1030507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

CP

05/01/2003

Electronic Signature of Signing Officer or Director

Date