

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2007 8:00 am
Secretary of State

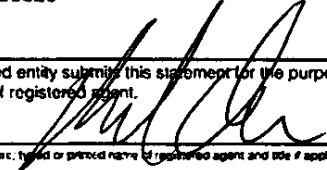
02-06-2007 90008 040 ***158.75

DOCUMENT # P02000123069	
1. Entity Name HOUSEWALL, INC.	

Principal Place of Business 1112 WESTON ROAD #255 WESTON, FL 33326	Mailing Address 1112 WESTON ROAD #255 WESTON, FL 33326
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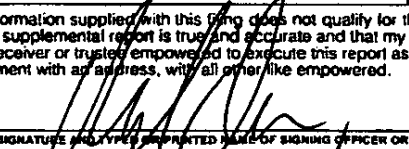
2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent DAGEN, MICHAEL 1112 WESTON ROAD #255 WESTON, FL 33326	
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7. Name and Address of New Registered Agent Name Scott Behren, Esq Street Address (P.O. Box Number is Not Acceptable) 2853 Executive Park Dr, Suite 103 City Weston FL Zip Code 33326	
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  CEO DATE 2/1/07	

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE CEO	☐ Delete	TITLE	☐ Change ☐ Addition
NAME DAGEN, MICHAEL		NAME	
STREET ADDRESS 1112 WESTON ROAD, #255		STREET ADDRESS	
CITY-ST-ZIP WESTON, FL 33326		CITY-ST-ZIP	
TITLE P	☒ Delete	TITLE	☐ Change ☐ Addition
NAME BERGER, MARK		NAME	
STREET ADDRESS 1136 SORRENTO DR.		STREET ADDRESS	
CITY-ST-ZIP WESTON, FL 33326		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this form does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  Michael Dagen DATE 2/1/07 DAYTIME PHONE 305 817 9881	

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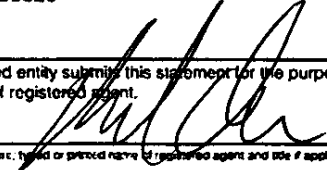
4. FEI Number
43-1983226

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

Name **Scott Behren, Esq**
Street Address (P.O. Box Number is Not Acceptable)

2853 Executive Park Dr, Suite 103
City **Weston** FL Zip Code **33326**

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SIGNATURE  **CEO** DATE **2/1/07**

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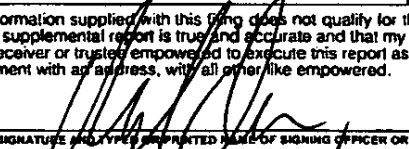
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SIGNATURE:  **Michael Dagen** DATE **2/1/07** DAYTIME PHONE **305 817 9881**