2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000001139

WALTHOUR'S PROPERTIES INC.



FILED Jan 11, 2007 08:00 AM **Secretary of State**

Principal Place of Business

1781 NW 154TH STREET OPALOCKA, FL 33054

Mailing Address

1781 NW 154TH STREET OPALOCKA, FL 33054



DO NOT WRITE IN THIS SPACE

01082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 02-0660641

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

WALTHOUR, BERTRAN DO NOT WRITE

1781 NW 154TH STREET IN THIS SPACE OPALOCKA, FL 33054

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

Signature, typed or printed name of registered agent and title if applicable.

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature regulard when reinstating)

DATE

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

U000000583305 01/11/07-80068-002 150.00

OFFICERS AND DIRECTORS 10. TITLE WALTHOUR, BERTRAN 1781 NW 154TH STREET STREET ADDRESS OPALOCKA, FL 33054 CITY-ST-ZIP TITLE WALTHOUR, JOSHUA J 1781 NW 154TH STREET STREET ADDRESS CITY-ST-ZIP OPALOCKA, FL 33054 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

DO NOT WRITE IN THIS SPACE

12. I nereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP

OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #