

2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 27, 2007
Secretary of State**

DOCUMENT# P03000003985

Entity Name: WMC CONSTRUCTION, INC.

Current Principal Place of Business:

27400 SW 163 CT.
HOMESTEAD, FL 33031

New Principal Place of Business:

Current Mailing Address:

27400 SW 163 CT.
HOMESTEAD, FL 33031

New Mailing Address:

FEI Number: 03-0499214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAILLY, WALTER
27400 SW 163 CT.
HOMESTEAD, FL 33031 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: PTD () Delete
Name: BRAILLY, WALTER
Address: 27400 SW 163 CT.
City-St-Zip: HOMESTEAD, FL 33031

Title: SD () Delete
Name: LINARES, ALEJANDRA
Address: 27400 SW 163 CT.
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BRAILLY, WALTER G
Address: 27400 SW 163 CT.
City-St-Zip: HOMESTEAD, FL 33031

Title: SD (X) Change () Addition
Name: LINARES, ALEJANDRA I
Address: 27400 SW 163 CT.
City-St-Zip: HOMESTEAD, FL 33031

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: A. LINARES

SD

03/27/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date