

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Oct 28, 2008  
Secretary of State**

DOCUMENT# P04000052315

Entity Name: TECWALL, INC.

**Current Principal Place of Business:**

2781 SW 56 AVE.  
PEMBROKE PINES, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

2781 SW 56 AVE.  
PEMBROKE PINES, FL 33023

**New Mailing Address:**

FEI Number: 16-1696450      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANTOS, MAURIO C ESQ.  
25 SE 2 AVE., STE. 1235  
MIAMI, FL 33131    US

**Name and Address of New Registered Agent:**

SANTOS, MAURO C ESQ.  
25 SE 2 AVE., STE. 1235  
MIAMI, FL 33131    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: MAURO C. SANTOS      10/28/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ROYD, JAMES A  
Address: 1316 NW 127 DRIVE  
City-St-Zip: SUNRISE, FL 33303

Title: V      ( ) Delete  
Name: REED, BARRY S  
Address: 11060 SW 23 ST  
City-St-Zip: DAVIE, FL 33324

Title: V      ( ) Delete  
Name: MCGEE, JOHN  
Address: 11050 SW 23 STREET  
City-St-Zip: DAVIE, FL 33324

Title: V      (X) Delete  
Name: BETHANCOURT, SERAFIN M  
Address: 10461 SW 16TH PLACE  
City-St-Zip: DAVIE, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: ROYO, JAMES A  
Address: 1316 NW 127 DRIVE  
City-St-Zip: SUNRISE, FL 33303

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES A. ROYO      D      10/28/2008  
Electronic Signature of Signing Officer or Director      Date