

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090879

Entity Name: WALIQ USA, CORP.

FILED  
Jun 14, 2007  
Secretary of State

## Current Principal Place of Business:

2141 N. UNIVERSITY DR. SUITE 370  
POMPANO BEACH, FL 33071

## New Principal Place of Business:

4613 N. UNIVERSITY DR. SUITE 553  
POMPANO BEACH, FL 33067

## Current Mailing Address:

2141 N. UNIVERSITY DR. SUITE 370  
POMPANO BEACH, FL 33071

## New Mailing Address:

4613 N. UNIVERSITY DR. SUITE 553  
POMPANO BEACH, FL 33067

FEI Number: 20-3087957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THORNTON, FERNANDO  
2141 N. UNIVERSITY DR. SUITE 370  
POMPANO BEACH, FL 33071 US

## Name and Address of New Registered Agent:

THORNTON, FERNANDO  
4613 N. UNIVERSITY DR. SUITE 553  
POMPANO BEACH, FL 33067 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:

06/14/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: THORNTON, FERNANDO  
Address: 2141 N. UNIVERSITY DR. SUITE 370  
City-St-Zip: POMPANO BEACH, FL 33071

Title: VP ( ) Delete  
Name: SUAREZ, CHRISTIAN  
Address: 2141 N. UNIVERSITY DR. SUITE 370  
City-St-Zip: POMPANO BEACH, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: THORNTON, FERNANDO  
Address: 4613 N. UNIVERSITY DR. SUITE 553  
City-St-Zip: POMPANO BEACH, FL 33067

Title: VP (X) Change ( ) Addition  
Name: SUAREZ, CHRISTIAN  
Address: 4613 N. UNIVERSITY DR. SUITE 553  
City-St-Zip: POMPANO BEACH, FL 33067

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: FERNANDO THORNTON

P

06/14/2007

Electronic Signature of Signing Officer or Director

Date