2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099324

Entity Name: A & E WALLS & CEILINGS INC.

FILED Sep 04, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

P.O.BOX QUARRY FOX LANE

300971 12202

FERN PARK, FL 32730 1 SANFORD, FL 32773

Current Mailing Address: New Mailing Address:

P.O. BOX 300971

FERN PARK, FL 32730 1

FEI Number: 22-3916068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARRERO, AWILDA OWNER

1116 POINTE NEWPORT TERRACE
APT. # 214
CASSELBERRY, FL 32707 US

MARRERO, AWILDA P
MAGNOLIA PARK TRAIL
100
SANFORD, FL 32773 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: AWILDA MARRERO 09/04/2007

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 Title: P (X) Change () Addition

Name: OLIVO, EDWIN Name: OLIVO, EDWIN

Address: 1116 POINTE NEWPORT TERRACE,APT #214 Address: 100 MAGNOLIA PARK TRAIL

City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: SANFORD, FL 32773

Name:MARRERO, AWILDAName:MARRERO, AWILDAAddress:1116 POINTE NEWPORT TERRACE,APT #214Address:100 MAGNOLIA PARK TRAILCity-St-Zip:CASSELBERRY, FL 32707City-St-Zip:SANFORD, FL 32773

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: EDWIN OLIVO P 09/04/2007