2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 04, 2007
Secretary of State

DOCUMENT# P05000142175

Entity Name: WALCOTT, INC.

Current Principal Place of Business:

1100 SE 5TH CT.
#79
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

13085 77TH PLACE NORTH
WEST PALM BEACH, FL 33412 US

Current Mailing Address:

PO BOX 610639
POMPANO BEACH, FL 33061

New Mailing Address:

13085 77TH PLACE NORTH
WEST PALM BEACH, FL 33412

FEI Number: 20-3655298 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALCOTT, JASON
1100 SE 5TH CT.
#79
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

WALCOTT, JASON
13085 77TH PLACE NORTH
WEST PALM BEACH, FL 33412 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: _____ 12/04/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: WALCOTT, JASON
Address: PO BOX 610639
City-St-Zip: POMPANO BEACH, FL 33061 US

Title: D (X) Delete
Name: WALCOTT, REANNE
Address: PO BOX 610639
City-St-Zip: POMPANO BEACH, FL 33061 US

Title: D (X) Delete
Name: WALCOTT, JASON
Address: PO BOX 610639
City-St-Zip: POMPANO BEACH, FL 33061 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: WALCOTT, JASON
Address: 13085 77TH PLACE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412 US

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: JASON WALCOTT PRES 12/04/2007
Electronic Signature of Signing Officer or Director — Date