2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100300

Entity Name: MEDITERRANEAN WALLS. INC

FILED Apr 17, 2009 Secretary of State

| Current P | rincipal Place of Business: | New Principal Place of Business: |
|--|--|--|
| 2121 N O | CEAN BLVD | 555 S OCEAN BLVD #5 |
| | ΓΟN, FL 33431 | BOCA RATON, FL 33432 |
| Current Mailing Address: | | New Mailing Address: |
| 2121 N O | CEAN BLVD | 555 S OCEAN BLVD #5 |
| | ΓΟN, FL 33431 | BOCA RATON, FL 33432 |
| FEI Number: | 20-5305389 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: |
| NOGUEIRA, DANIEL 2121 N OCEAN BLVD APT 207 E | | NOGUEIRA, DANIEL 555 S OCEAN BLVD #5 |
| BOCA RATON, FL 33431 US | | BOCA RATON, FL 33432 US |
| | named entity submits this statement for te of Florida. | he purpose of changing its registered office or registered agent, or both, |
| SIGNATURE: | | 04/17/2009 |
| | Electronic Signature of Registered | Agent Date |
| Election Can | npaign Financing Trust Fund Contribution (). | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |
| Title: Name: Address: City-St-Zip: | PTS () Delete ALTAMIRANO, ALEJANDRA C 1835 W. FLAGLER STREET, SUITE 201 MIAMI, FL 33135 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | D () Delete FLOWERS AROMATICS, S.A. DE C.V. TRIGO #90 COL. GRANJAS ESMERALDO DELEGACION IZT CP MEXICO DF, 09810 | Title: D (X) Change () Addition Name: FLOWERS AROMATICS, S.A. DE C.V. Address: TRIGO #90 COL. GRANJAS ESMERALDA City-St-Zip: DELEGACION IZT MEXICO, DF 09810 |

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: ALEJANDRA ALTAMIRANO PTS 04/17/2009