2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086955

Entity Name: WALLINBA FINANCIAL GROUP, INC

FILED Apr 29, 2009 Secretary of State

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

2500 E. HALLANDALE BEACH BLVD 17707 NW MIAMI COURT

407 101-7

HALLANDALE BEACH, FL 33009 MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

2500 E. HALLANDALE BEACH BLVD 17707 NW MIAMI COURT

101-7

HALLANDALE BEACH, FL 33009 MIAMI, FL 33169

FEI Number: 32-0210541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WALLACE, ERETT B
2500 E. HALLANDALE BEACH BLVD
407

WALLACE, ERETT B
17707 NW MIAMI COURT
101-7

HALLANDALE BEACH, FL 33009 US MIAMI, FL 33169 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: ERETT B. WALLACE 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition Name: WALLACE, JANE S WALLACE, JANE S

Address: 2500 E. HALLANDALE BEACH BLVD, SUITE 407 Address: 17707 NW MIAMI COURT, SUITE 101-7

City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: MIAMI, FL 33169

Name: WALLACE, ERETT B Name: WALLACE, ERETT B

Address: 2500 E. HALLANDALE BEACH BLVD, SUITE 407 Address: 17707 NW MIAMI COURT, SUITE 101-7

City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: MIAMI, FL 33169

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: ERETT B. WALLACE VP 04/29/2009