

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000051559

FILED  
Jun 17, 2010  
Secretary of State

**Entity Name:** THROW IT ON THE WALL, INC.

**Current Principal Place of Business:**

100 ALMERIA AVENUE  
SUITE 205  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

100 ALMERIA AVENUE  
SUITE 205  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 27-0483733

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEN, STEPHEN H ESQ.  
100 ALMERIA AVENUE  
SUITE 205  
CORAL GABLES, FL 33134 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ROSEN, STEPHEN H ESQ.  
Address: 100 ALMERIA AVENUE, SUITE 205  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD  
Name: HEPBURN, SOLOMON  
Address: 3325 GRIFFIN ROAD, PMB 206  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD  
Name: LEWIS, ALAN  
Address: 6717 CAMELIA DRIVE  
City-St-Zip: MIRAMAR, FL

Title: TD  
Name: ALEXANDER, ROBERT  
Address: 1760 SW 67 TERRACE  
City-St-Zip: PLANTATION, FL 33317

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN H. ROSEN

PRES

06/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date