2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062390

Entity Name: DE MARE WALLCOVERINGS, INC.

FILED Jan 14, 2008 Secretary of State

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

9580 SUNRISE LAKES BLVD 8911 NW 26TH PLACE SUITE 107 SUNRISE, FL 33322 US

SUNRISE, FL 33322 US

Current Mailing Address: New Mailing Address:

9580 SUNRISE LAKES BLVD 8911 NW 26TH PLACE SUITE 107 SUNRISE, FL 33322 US SUNRISE, FL 33322 US

FEI Number: 65-0434440 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:

DE MARE, PIETER
9580 SUNRISE LAKES BLVD
8911 NW 26TH PLACE
SUITE 107
SUNRISE, FL 33322 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: PIETER DEMARE 01/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 DE MARE, PIETER
 Name:
 DE MARE, PIETER

 Address:
 9580 SUNRISE LAKES BLVD, SUITE 107
 Address:
 8911 NW 26TH PLACE

City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: SUNRISE, FL 33322 US

Title: VP () Delete Title: VP (X) Change () Addition Name: DEMARE, PIETER A SR Name: DEMARE, PIETER

Address: 9580 SUNRISE LAKES BLVD, SUITE 107 Address: 8911 NW 26TH PLACE City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: SUNRISE, FL 33322 US

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: PIETER DEMARE D 01/14/2008