

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027693

Entity Name: M-WALL-ACE CORPORATION

FILED
Apr 16, 2007
Secretary of State

Current Principal Place of Business:

5300 SW 57TH STREET
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

5300 SW 57TH STREET
DAVIE, FL 33314

New Mailing Address:

FEI Number: 65-0744059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHEWS, WALLACE
5300 SW 57TH STREET
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

MATHEWS, ROBERT
5300 SW 57TH STREET
DAVIE, FL 33314 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: MATHEWS, ROBERT

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATHEWS, WALLACE
Address: 5300 SW 57TH STREET
City-St-Zip: DAVIE, FL 33314

Title: P () Delete
Name: MATHEWS, ROBERT
Address: 5711 SW 53RD TERRACE
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: MATHEWS, ROBERT
Address: 5330 SW 57TH STREET
City-St-Zip: DAVIE, FL 33314

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT MATHEWS

P

04/16/2007

Electronic Signature of Signing Officer or Director

Date