

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P99000025649

1. Entity Name

FIRST WALL STREET GROUP, INC.



FILED

04 SEP 13 AM 10:35

Principal Place of Business

5961 FALLS CIRCLE DR N #109
LAUDERHILL FL 33319

Mailing Address

5961 FALLS CIRCLE DR N #109
LAUDERHILL FL 33319

2. Principal Place of Business

5961 Falls circle dr n

3. Mailing Address

5961 Falls circle dr n

Suite, Apt. #, etc.

109

Suite, Apt. #, etc.

N. # 109

City & State

LAUDERHILL FL

City & State

LAUDERHILL FL

Zip

33319

Country

BRUNN

Zip

33319

Country

BRUNN

08/27/04 01002-009 50.00
SECRETARY OF STATE
TALLAHASSEE, FL 32399
MOORE CR2E034 (4/04)

4. FEI Number

65-0902370

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANNENBERG, ROBERT L
5961 FALLS CIRCLE DR N #109
LAUDERHILL FL 33319

7. Name and Address of New Registered Agent

Name

Robert Annenberg

Street Address (P.O. Box Number is Not Acceptable)

5961 Falls circle dr n # 109

City

LAUDERHILL

FL

Zip Code

33319

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8-3-04

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS
NAME ANNENBERG, ROBERT
STREET ADDRESS 5961 FALLS CIRCLE DR N #109
CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500040542975
08/27/04--01002--009 **100.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
500040542975
09/23/04--01057--007 **8.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-3-04

To whom it may concern we received our application for corp. Resolution
Returned to us stating that is was not filled out.

As per instructions from your office I was told I didn't have to fill out the information as long as
the Original info was the same and nothing changed. Therefore being that the case I signed the
application and sent it in along with my fee.

I will not pay a late fee of \$500.00 I have filled in the blanks as you can see the info is identical
to whats already on the paper

Inclosed is my check for the certificate.. Thanks

Robert Annenberg. Pres: First Wall Street Group,inc