

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**


5/11

**FILED**  
**Sep 10, 2004 8:00 am**  
**Secretary of State**

05-10-2004 90456 009 \*\*\*150.00

**DOCUMENT # P03000151094**

1. Entity Name  
**G.E.J. DRYWALL, INC.**




Principal Place of Business      Mailing Address  
**8466 N. LOCKWOOD RIDGE RD. #234**      **8466 N. LOCKWOOD RIDGE RD. #234**  
**SARASOTA, FL 34243**      **SARASOTA, FL 34243**

2. Principal Place of Business      3. Mailing Address  
**1004 57th AVE PL E**      **1004 57th AVE PL E**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**BRADENTON, FL**      **BRADENTON, FL**  
 Zip      Country      Zip      Country  
**34203**      **MANATEE**      **34203**      **MANATEE**

**66433412**



04142004      Chg-P      CR2E034 (10/03)

4. FEI Number **20-0640776**      Applied For  
**20-064776**      Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**GUTIERREZ, HERIBERTO**  
**8466 N. LOCKWOOD RIDGE RD. #234**  
**SARASOTA, FL 34243**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GUTIERREZ, HERIBERTO 8466 N. LOCKWOOD RIDGE RD. #234 SARASOTA, FL 34243 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JAIME GUTIERREZ 1004 57th AVE PL E, BTN. FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR LUIS ENRIQUE GUTIERREZ 1004 57th AVE PL E. BTN, FL 34203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Heriberto Gutierrez*      **HERIBERTO GUTIERREZ**      **4/22/04 (94) 228-0116**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

Attachment

66433412

September 3, 2004

G.E.J. DRYWALL INC  
1004 57<sup>th</sup> AVE. PL. E.  
BRADENTON, FL 34203

FLORIDA DEPARTMENT of STATE  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: P03000151094

Dear Sir/Madam;

This is in reference to the 2004 Annual Report which was sent back to me for corrections, and has been corrected.

I would like to explain why it has not been returned yet. I am of Hispanic race and do not know how to read or write in English. At this moment I have asked someone to translate this letter to me and to write this letter to you of explanation of delay.

If you could please excuse/waive any penalties for not returning this form back to you by said time allotted I would greatly appreciate it.

Thank you in advance for your attention to this matter.

Sincerely,

Heriberto Gutierrez

Attachments: Letter  
Form, Annual Report