## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000004252

Entity Name: SERVIN QUALITY DRY WALL, INC.

FILED May 12, 2005 Secretary of State

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Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
3268 DAN SARASOT	TI DRIVE A, FL 3423(	5			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
3268 DAN SARASOT	TI DRIVE A, FL 3423	5			
FEI Number	: 56-2426792	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
3268 DAN	BALVAN, JOS TI DRIVE TA, FL 34238				
	e named entit e of Florida.	ry submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI					
	Electr	onic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financ	193(2)(b), F.S., the corporation did noting Trust Fund Contribution ( ).		ACC TO OFFICERS AND DIDECTORS	
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS	
Title:		( ) Delete	Title:	() Change () Addition	
Name:	SERVIN-GAL 3268 DANTI	· ·	Name:		
Address: City-St-Zip:	SARASOTA,		Address: City-St-Zip:		
			5.1.y 5.1 <u>2.1</u> p.		
Title:		(X) Delete	Title:	() Change () Addition	
Name:		.VAN, ALFREDO	Name:		
Address:	3268 DANTI		Address:		
City-St-Zip:	SARASOTA,	FL 34235	City-St-Zip:		
Title:	Т	(X) Delete	Title:	( ) Change ( ) Addition	
Name:	SERVIN-GAL		Name:	• • • • • • • • • • • • • • • • • • • •	
Address:	3268 DANTI	•	Address:		
City-St-Zip:	SARASOTA,	FL 34235	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSE SERVIN-GALVAN PD 05/12/2005