


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 606790 (4) 1. Corporation Name GYPSUM CONSTRUCTION SOUTH, INC.					
Principal Place of Business 5374 NORTH ELSTON CHICAGO IL 60630			Mailing Address 5374 NORTH ELSTON CHICAGO IL 60630		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/16/1979	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 36-3032462	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
REISMAN, STEPHEN H 1 S.E. 3RD AVENUE SUITE 2600 MIAMI FL 33131				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
1.1 TITLE PD 1.2 NAME CAVANAUGH, SEAN 1.3 STREET ADDRESS 4310 LOSEE ROAD 1.4 CITY-ST-ZIP NORTH LAS VEGAS NV <input type="checkbox"/> DELETE					
2.1 TITLE VP 2.2 NAME ZOPPO, DAVID DEL 2.3 STREET ADDRESS 223 SW 8TH STREET 2.4 CITY-ST-ZIP FORT LAUDERDALE FL <input type="checkbox"/> DELETE					
3.1 TITLE AS 3.2 NAME DUHL, STUART 3.3 STREET ADDRESS 401 N MICHIGAN AVE #3400 3.4 CITY-ST-ZIP CHICAGO IL <input type="checkbox"/> DELETE					
4.1 TITLE ST 4.2 NAME DEMOS, JAMES T. 4.3 STREET ADDRESS 5374 NORTH ELSTON AVENUE 4.4 CITY-ST-ZIP CHICAGO IL <input type="checkbox"/> DELETE					
5.1 TITLE D 5.2 NAME GOLDSTEIN, GAIL 5.3 STREET ADDRESS 5374 N. ELSTON AVE. 5.4 CITY-ST-ZIP CHICAGO IL <input type="checkbox"/> DELETE					
6.1 TITLE AS 6.2 NAME CIANGIOLA, PATRICIA E. 6.3 STREET ADDRESS 5374 N. ELSTON AVE. 6.4 CITY-ST-ZIP CHICAGO IL <input type="checkbox"/> DELETE					

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/98 7736855500

CR2E034 (10/97)