

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 641105

Entity Name: CASINO DRYWALL, INC.

FILED  
Feb 10, 2004  
Secretary of State

## Current Principal Place of Business:

2680 NW 15TH COURT  
POMPANO BCH., FL 330698514

## New Principal Place of Business:

## Current Mailing Address:

2680 NW 15TH COURT  
POMPANO BCH., FL 330698514

## New Mailing Address:

FEI Number: 59-1941677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERENCIK, LIBANOFF, BRANDT & BUSTEMMOFE PA  
WESTSIDE CORPORATE CENTER  
150 S PINE ISLAND ROAD S TE 400  
FORT LAUDERDALE, FL 33324 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: LAVIGNE, GUY F  
Address: 2680 N W 15TH COURT  
City-St-Zip: POMPAN0 BCH, FL 33069

Title: VTD ( ) Delete  
Name: ANNON, WILLIAM S  
Address: 2680 N W 15TH CT  
City-St-Zip: POMPAN0 BCH, FL 33069

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ASTR ( ) Change (X) Addition  
Name: ROY, CHANTAL C  
Address: 2680 NW 15TH COURT  
City-St-Zip: POMPAN0 BCH, FL 33069

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: WILLIAM S. ANNON

VP

02/10/2004

Electronic Signature of Signing Officer or Director

Date