

2005 F03000003882 CORPORATION  
ANNUAL REPORT

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DOCUMENT # F03000003882

1. Entity Name  
PALM CITY DRYWALL, INC. OF NEVADA



**FILED**  
**Jan 24, 2005 08:00 AM**  
**Secretary of State**

Principal Place of Business  
2764 LAKE SAHARA DR., STE. 111  
LAS VEGAS, NV 89117

Contact Information: Dogs Deserve Better, Inc. • P.O. Box 23 • Tipton, PA 16684 • Toll Free 1.877.636.1408 • 814.941.7447  
email: info@dogsdeservebetter.org • Website designed and maintained by Crescent Communications  
Mailing Address:  
SUITE 318, PMB 151  
5100 S. CLEVELAND AVE.  
FT. MYERS, FL 33907



01142005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 68-0558103	Applied For Not Applicab
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

ATKIN, HOWARD  
1424 DEAN STREET  
FT. MYERS, FL 33901

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPST
NAME	HAGOPIAN, ROBERT
STREET ADDRESS	2764 LAKE SAHARA DR., STE. 111
CITY - ST - ZIP	LAS VEGAS, NV 89117

TITLE	VP
NAME	KING, RONALD E
STREET ADDRESS	6060 ANCMORLINE CT.
CITY - ST - ZIP	N. FT. MYERS, FL 33917

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY - ST - ZIP	

UD00000193670  
01/25/05-80069-023 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

<http://dogsdeservebetter.com/Bodied.htm> OFFICER OR DIRECTOR

Don 12/22/04