

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

8/1

FILED
Aug 28, 2006 8:00 am
Secretary of State

08-15-2006 90001 025 ***563.75



2nd MOORE CR2E034 (4/06)

DOCUMENT # F05000001305					
1. Entity Name MANZANO DRYWALL, INC.					
Principal Place of Business 2496 W HIGHWAY 98, LOT #21 MARY ESTHER FL 32569			Mailing Address 2496 W HIGHWAY 98, LOT #21 MARY ESTHER FL 32569		
2. Principal Place of Business			3. Mailing Address 2142 Tom St.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State Navarre, FL		
Zip		Country		4. FEI Number 20-0361479	
Zip 32566		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MANZANO, EPIGMENIO 2496 W HIGHWAY 98, LOT #21 MARY ESTHER FL 32569 2142 Tom St. Navarre, FL 32566			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			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 <u>Epiemio M</u> (NOTE: Registered Agent signature required when renouncing)					
DATE					
FILE NOW!!! FEE IS \$550.00 DUE BY September 6, 2006 Make Check Payable to Florida Department of State			S. 807.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐		
			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	TITLE	NAME	STREET ADDRESS
CP	MANZANO, EPIGMENIO	2496 W HIGHWAY 98, LOT #21 MARY ESTHER FL 32569		Manzano Epiemio	2142 Tom St. Navarre, FL 32566
V	MANZANO, JESUS	2496 W HIGHWAY 98, LOT #21 MARY ESTHER FL 32569		Manzano, Jesus	2142 Tom St. Navarre, FL 32566
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 807, 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: <u>Epiemio M</u>			8-10-06 (850) 791-1907		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		