

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F67781

FILED
Jan 20, 2009
Secretary of State

Entity Name: ACTIVE DRYWALL SOUTH, INC.

Current Principal Place of Business:

4444 SW 71ST AVE.
110
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

4444 SW 71ST AVE.
110
MIAMI, FL 33155

New Mailing Address:

FEI Number: 59-2151847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUCKERMAN, LARRY
4444 SW 71ST AVE.
110
MIAMI, FL 33155 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: PD () Delete
Name: KOUSSIAFES, PIERRE,
Address: 6200 SW 84TH ST.
City-St-Zip: MIAMI, FL 33143

Title: STD () Delete
Name: ZUCKERMAN, LARRY,
Address: 13280 SW 63 CT.
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: KOUSSIAFES, ANGELOS B
Address: 4820 SW 69TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: CARON, LAUAL
Address: 3001 SW 18TH TERR.
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PIERRE KOUSSIAFES

P

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date