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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F97000001668**1. Corporation Name

PREMIER DRYWALL TOOL CO.

Principal Place of Business
987 COMMERCIAL ST
SAN CARLOS CA 94070

Mailing Address

987 COMMERCIAL ST-SAN CARLOS CA 94070

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90024 039 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

) 04/02/1997			
2. Principal Pl	lace of Business	2a. Mailing	Address	•		4. FEI Number		Apr	plied For
i i		26				94-2436646		No	t Applicable
Suite, Apt.	#, etc		pt. #, etc.			5. Certifcate of Status Desired		\$8.75 A	
City & State	9	City & S	State			6. Election Campaign Financing		\$5.00	May Ro
¬ ´	5	— ·	510.10			Trust Fund Contribution		Added to	
3 Zip	Country	28		Countr		8. This corporation owes the cur	rent vear int:		
.T	·	— ·	30	٠ .	,	Personal Property Tax.	rent year and		□No
4	25	29		<u>'</u>	_	10. Name and Address of New	Registered /		
	9. Name and Address of Curren	r Kadizielen wi	Jent	81	Name	W. Hatte and Hadress of from	ito Bioto i ou i	-50-1	
C T CORPORATION SYSTEM									
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				82	Street Addre	ess (P.O. Box Number is Not Accept	:able)		
				<u></u>					
r UNI	TIAMON I E SSSET			83	'				
				84	City	t - La - April 1981	FL	85 Zip C	Code
44 Dun-1954	to the provisions of Sections 607.0502	2 and 607 1509	Florida Statutos	the show	e-named come	oration submits this statement for the	purpose of	changing its	registered
office or re	to the provisions of Sections 607.050, egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such	chance was auth	iorized by	/ the corporatio	on's board of directors. I hereby acce	pt the appoir	itment as rec	gistered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable	. (NOTE: Re	egistered Age	ent signature required		DATE		
12.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	DC		☐ DELETE	1.1 TITLE				☐ Change	Addition
NAME	Moore, William e			1.2 NAME					
STREET ADDRESS	987 COMMERCIAL ST			1.3 STREE	ET ADDRESS				
CITY-ST-ZIP	SAN CARLOS CA 94070			1.4 CITY-	ST-7IP				
TITLE	D		DELETE	2.1 TITLE				Change	Addition
	MOORE, DESIREE B "			2.2 NAME					
NAME	987 COMMERCIAL ST				T ADDRESS				
STREET ADDRESS	SAN CARLOS CA 94070			ľ	1	. Lagran et al.			_
CITY-ST-ZIP			DELETE	2. 4 CITY	-\$1-ZIP			Change	Additio
TITLE	DST FERRARI CTERUEN A		C DEFE1E	3.1 TITLE					
NAME	FERRARI, STEPHEN A			3.2 NAME		·			
STREET ADDRESS	987 COMMERCIAL ST			3.3 STREE	ET ADDRESS				
CITY-ST-ZIP	SAN CARLOS CA 94070		r=1	3.4. CITY-		·		Character	FT 4.4.491-
CITY-ST-ZIP TITLE	SAN CARLOS CA 94070		☐ DELETE					Change	Addition
	SAN CARLOS CA 940/0		☐ DELETE	3.4. CITY-	\$T-ZIP			Change	Addition
TITLE	SAN CAHLOS CA 94070		☐ DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME	\$T-ZIP			Change	☐ Addition
TITLE NAME STREET ADDRESS	SAN CAHLOS CA 94070	-	DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME	ST-ZIP			☐ Change	☐ Addition
TITLE NAME	SAN CAHLOS CA 94070		DELETE	3.4. CITY- 4.1 TITLE 4. 2 NAME 4.3 STREE	ST-ZIP			Change	_
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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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.