## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 02, 2001 8:00 am Secretary of State **DOCUMENT # J50265** DRYWALL INTERIORS, INC. 04-02-2001 90059 003 \*\*\*150.00 Principal Place of Business Mailing Address 3100 NE BOCA RATON BLVD 3100 NE BOCA RATON BLVD 733440 BOCA RATON FL 33431 **BOCA RATON FL 33431** US 2. Principal Place of Busines 3. Mailing Address 4680 NW 28Th AVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2767932 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DYER, GREG Street Address (P.O. Box Number is Not Acceptable) 4680 N. W. 28TH AVENUE 4160 N.W. OAK CIRCLE BELCTE **BOCA RATON FL 33431** Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, OFFICERS AND DIRECTORS 12. CR2E034 (10/00) ☐ Change Addition Delete TITLE TITLE -DYER, GREG NAME NAME STREET ADDRESS 4680 N. W. 28TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Change ☐ Addition ☐ Delete TITLE DYER, LINDA NAME NAME STREET ADDRESS STREET ADDRESS 4680 N. W. 28TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with interpretable of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with interpretable or the corporation of the corpo

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIE

Rinda Vend LiNOA DYER, V.P.

03-26-01

561-988-1000

Daytime Phone #