2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attach,

SIGNATURE:

ent with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sep 09, 2005 8:00 am Secretary of State **DOCUMENT # P00000031967** 09-09-2005 90031 035 ***150.00 GENERAL DRYWALL, INC. Principal Place of Business Mailing Address OTAGGAAF 2200 E. HALLANDALE BEACH BLVD 2200 E. HALLANDALE BEACH BLVD **APT 106** APT 106 HALLANDALE, FL 33009 HALLANDALE, FL 33009 2. Principal Place of Business 3. Mailing Address 1395 N.E 167 St 395 N.E 16754 Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 08302005 CR2E034 (10/03) Building 10 Bulloing 10 Apt 204 4. FEI Number Applied For 65-1005413 Not Applicable 33162 \$8.75 Additional 5. Certificate of Status Desired 3316 DADe D40 C Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DIPAULA DIPAOLA, CARLOS A ... Street Address (P.O. Box Number is Not Acceptable) 2200 E. HALLANDALE BEACH, BLVD **APT 106** HALLANDALE, FL33009 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. 9~ 4.05. SIGNATURE (NOTE: Registored Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September, 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTSD: Delete TITLE ☐ Change ☐ Addition TITLE DIRAOLA, CARLOS NAME NAME STREET ADORESS 2200 E, HALLANDALE BEACH BLVD STREET ADDRESS CITY-ST-ZIP HALLANDALE, FL 33009 CITY-ST-ZIP CAPIOS DIPANIA TITLE ☐ Change ☐ Addition TITLE ☐ Delete 1395 N.E 167 ST NAME NAME Building 10 APT 204 STREET ADDRESS STREET ADDRESS U.M.BFL 33/62 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if

FILED

ALIACHMENT

50066016 #P00000031967

GENERAL DRYWALL INC 8-18-05 Dear six

This letter is to impore you, on Abril 28 I sAND YOU \$ 150 gg. FOR MY CORPORATION THE Post office Delete, my PAYMENT, I NOVE From 2200 EST, HALLANDALLO BEACH BLUD FLA 33009 TO 1395 NE 167 ST NORTH, MIANI, BEACH. FLA. 33162, building # 10 APT, 204_

IAM SENDINGA, Second elect, # 1314. Please let me know it you receive I Thank you very much