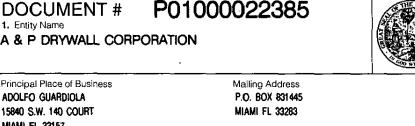
2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P01000022385 **DOCUMENT #**





A & P DRYWALL CORPORATION								04-26-2003 90-	100 013	150.0	
ADOLFO GUARDIOLA P.O. BOX				g Address BOX 831445 I FL 33283							
2. Principal Place of Business			3. Mail	3. Mailing Address							
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4. FEI Number 65-1085526 Applied Fo Not Applie			plied For t Applicable	
Zip Country		Zip		Country	/	5 . Ce			75 Additional Required		
	6. Name	and Address of Curre	nt Registere	d Agent			7. Na	me and Address of New Reg	istered Agen	<u> </u>	
10112011	A DATE:					Name	خين ا				
LONDONO, PATRICIA 15840 S.W. 140 COURT						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL	33177	maging distri				<u>-</u>	-5				
142									FL	Zip Code	i
	e named entity ations of register		t for the purpo	ose of changing its	registered	office or registe	ered agen	t, or both, in the State of Floric	da. I am famili	ar with, a	and accept
SIGNATURE	Signature, typed o	or printed name of registered ag	ent and title if appli	icable. (NOTE	E: Registered A	gent signature require	ed when reins	lating)	OATE		
											
		FEE IS \$150.00	nn					9. Election Campaign Finan			0 May Be
Afte	er May 1, 200	FEE IS \$150.00 Fee will be \$550.0 Florida Department					, , ,	Election Campaign Finan Trust Fund Contribution.	ncing		May Be to Fees
Afte	er May 1, 200	3 Fee will be \$550.0	t of State	RS .	11.		ADDI			Added	to Fees
Afte Make Check	er May 1, 200 k Payable to	3 Fee will be \$550.0 Florida Department OFFICERS AN	t of State	RS Delete	11.		ADDI	Trust Fund Contribution.	ERS AND DIR	Added	to Fees
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

3/20/03

Date

Daytime Phone #