

FILED  
Jun 27, 2002 8:00 am  
Secretary of State

05-23-2002 90047 026 \*\*\*150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000074019  
1. Entity Name  
D.R. DRYWALL OF FLORIDA CORP.

Principal Place of Business  
26502 SW 125 COURT  
NARANJA FL 33032  
Mailing Address  
26502 SW 125 COURT  
NARANJA FL 33032



2. Principal Place of Business  
~~26502 SW 125 COURT~~ 12553 SW 264 Terr  
Suite, Apt. #, etc. house  
City & State Naranja F.L.

3. Mailing Address  
12553 SW 264 Terr.  
Suite, Apt. #, etc. house  
City & State Naranja F.L.

DO NOT WRITE IN THIS SPACE

4. FEI Number 105-1124826  
Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
RODRIGUEZ, DIONISIO  
26502 SW 125 COURT  
NARANJA FL 33032  
7. Name and Address of New Registered Agent  
Name Dionisio Rodriguez  
Street Address (P.O. Box Number is Not Acceptable) 12553 SW 264 Terr.  
City Naranja FL Zip Code 33032

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 *Dionisio Rodriguez*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.   
FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State  
10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees.

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD RODRIGUEZ, DIONISIO 26502 SW 125 COURT NARANJA FL 33032 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Rodriguez, Dionisio <del>12553 SW 264 Terr.</del> Naranja FL 33032 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 all other like empowered.

SIGNATURE *Dionisio Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date Daytime Phone #

CR2E034 (9/01)