2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P02000006200 04-23-2007 90269 049 ***150.00 1. Entity Name MARTIN DRYWALL FINISH CORP. Principal Place of Business Mailing Address 40077776 7040 WEST 3RD AVE. 7040 WEST 3RD AVE. HIALEAH, FL 33014 HIALEAH, FL 33014 04202007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0582564 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VARGAS, PRIMITIVO M DO NOT WRITE 7040 WEST 3RD AVE. HIALEAH, FL 33014 IN THIS SPACE 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE VARGAS, PRIMITIVO M NAME STREET ADDRESS 7040 WEST 3RD AVE. HIALEAH, FL 33014 CITY+ST-7IP VD TITLE VARGAS, LUIS A NAME 7040 W 3RD AVE STREET ADDRESS HIALEAH, FL 33014 CITY-ST-ZIP TD TITLE AVARGAS, FELIX 7040 W 3RD AVE STREET ADDRESS DO NOT WRITE HIALEAH, FL 33014 CITY - ST - ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

STREET ADDRESS CITY - ST - ZIP TITLE

STREET ADDRESS

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED