2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 02, 2003 8:00 am Secretary of State

DOCUMENT # P0200056369 1. Entity Name B & B DRYWALL. CORP.)	04-14-2003 90927 017 ***150.00	
Principal Place 14655 NW 89 / MIAMI FL 3301	Mailing Address 14655 NW 89 AVE MIAMI FL 33018									
2. Principal Place of Business				3. Mailing Address				7	i (Marie Ce) (ii deile (1914 peur, peul ceit) deins eilfe bles cile drob ion assi	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES	_
City & State				City & State				4. FEJ Number Applied For Not Applicable		
Zip	Country			Zip Coun		5. Certificate of Status Desired		Fee Hequired		
	6. Name	and Addres	s of Current Re	gistered A	gent		سانهایشود بر د جیار	7.	Name and Address of New Registered Agent	
شاكنو دي إساب مبد						in the second second	Name			
BARRIOS,		• =	_ <u></u>	The state of the s			Street Address (P.O. Box Number is Not Acceptable)			
	14655 NW 89 AVE									1
Miami FL 33018										
·							City FL Zip Code			
8. The above the obligati	named entitions of recis	y submits thi lered agent.	s statement for th	ne purpose	of changing its	s register	ed office or regist	ered ag	gent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed	perprenied name	of registered agent and	jife (applicabl	e. (NO	E: Registere	id Agent signature requir	n nariw be	reinstating) DATE	
ំ 3. After	May 1, 20	FEE IS 03 Fee will o Florida D	\$150.00 be \$550.00 epartment of \$	itate			•		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.	
10.			FICERS AND DI			11.		A	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	[
	P	0	FICEIS AND C	IIICO TOTIO	☐ Deleta	TITE.	E		Change Addition	8
TITLE -	BARRIOS	**			C Deserte	NAN	- 1			흔
STREET AODRESS		89 AVE				STR	EFT ADDRESS		•	8
CITY: ST-ZIP	MIAMI FL					CITY	'-ST-2IP			l E
TITLE	1000 5000 1 10				☐ Delete	TITL	E		☐ Change ☐ Addition	CR2E034 (10/02)
NAMÉ	ł	Ý.				NAA	ię i			
STREET ADDRESS	1	. 3				STR	EET ADORESS			
CITY-ST-ZIP	ļ	. 7.				cm	'-ST-ZIP			
TITLE		رة بــ بحييات	· way was su		Delete	· nn			Change · · · · · · · · · · · · · · · · · · ·	
NAME	l	Majara				NAM	1			
"STREET ADDRESS"	J				•		EET ADDRESS	-		
CITY-ST-ZIP						CITY	'-\$T-ZIP			┨
TITLE					Delete	TITI.	i i		☐ Change ☐ Addition	Į.
NAME	ł					NAA	- 1		•	İ
STREET ADDRESS	1				•		EET ADORESS '-st-zip			}
CITY-ST-ZIP					0			<u>·</u> _	☐ Change ☐ Addition	1
TITLE	ł				☐ Delete	TITE NAM	ſ			ĺ
NAME CTREET ADORESS	[•				EET ADDRESS			
STREET ADCRESS CITY-ST-ZIP							r-S1-ZIP			
ļ <u> </u>					Delete	III	<u> </u>		☐ Change ☐ Addition	
TITLE NAME	l					NAA	"			1
STREET ADDRESS						- 1	EET ADDRESS			}
CITY-ST-ZIP	1						r-ST-ZIP]
	certify that th	ne information	n supplied with th	nis filing do	es not qualify for	or the exc	mption stated in	Section	n 119.07(3)(i), Florida Statutes, I further certify that the information e legal effect as if made under oath; that I am an officer or director yide Statutes; and that my parse appears in Block 10 or Block 11 if	
i of the cor	rporation of 1	ine receiver c	nental report is tr or trustee empow h an address, wit	ereg to exe	cole luiz rebot	t as requ	iture snall have th ired by Chapter 6	e same 07, Flor	e legal effect as it made under dath; that I am an officer of director prida Statutes; and that my name appears in Block 10 or Block 11 if	

SIGNATURE: _