## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000056453

City-St-Zip: CORAL GABLES, FL 33065

Entity Name: G & A DRYWALL ENTERPRISES, INC.

FILED Apr 28, 2003 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
2744 NW 87 AVE. CORAL SPRINGS, FL 33065			10352 NW 55TH STR SUNRISE, FL 33351	10352 NW 55TH STREET SUNRISE, FL 33351	
Current M	lailing Addre	ess:	New Mailing Address	New Mailing Address:	
2744 NW 87 AVE. CORAL SPRINGS, FL 33065			10352 NW 55TH STR SUNRISE, FL 33351	10352 NW 55TH STREET SUNRISE, FL 33351	
FEI Number: 74-3036940 FEI Number Applied For ( )			FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	Ś7 AVE. PRINGS, FL :		purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI					
Electronic Signature of Registered Agent			gent	Date	
	mpaign Financii S AND DIREG	ng Trust Fund Contribution ( ).	ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	AVARIANO, Ò 2744 NW 87 A CORAL GABL		Title: Name: Address: City-St-Zip: Title:	( ) Change ( ) Addition ( ) Change ( ) Addition	
Name: Address:	WILLIAMS, SI 2744 NW 87	JSAN	Name: Address:	· · · · · · · · · · · · · · · · · · ·	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSWALDO AVARIANO PD 04/28/2003