

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074622

FILED
May 03, 2004
Secretary of State

Entity Name: BERT MATHEWS DRYWALL, INC.

Current Principal Place of Business:

16235 BANYAN AVE
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

1165 OXSALIDA ST.
PORT CHARLOTTE, FL 33952 US

Current Mailing Address:

16235 BANYAN AVE
PORT CHARLOTTE, FL 33954

New Mailing Address:

1165 OXSALIDA ST.
PORT CHARLOTTE, FL 33952 US

FEI Number: 01-0732759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATHEWS, BERT
16235 BANYAN AVE
PORT CHARLOTTE, FL 33954 US

Name and Address of New Registered Agent:

MATHEWS, BERT
1165 OXSALIDA ST.
PORT CHARLOTTE, FL 33952 US

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: BERT MATHEWS

05/03/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATHEWS, BERT
Address: 16235 BANYAN AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: VPD () Delete
Name: WALKER, JOSEPH
Address: 529 SALANO LOOP
City-St-Zip: PUNTA GORDA, FL 33950

Title: S (X) Delete
Name: CHARALABOPOULOS, SPIRIDON N
Address: 2363 DUKE LANE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: BERT MATHEWS

PD

05/03/2004

Electronic Signature of Signing Officer or Director

Date