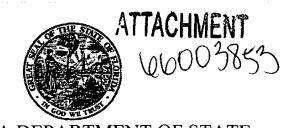
## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 07, 2006 8:00 am Secretary of State

OCUMENT # P02000113544		01-26-20
Entity Name		
DIEL DOMANIL AADDADATIAN	12 C 2 1 M 2 2 1 L 2 2 2 1	

1. Entity Nam	CUMENT # P02000113544 by Name IL DRYWALL CORPORATION					01-26-2006	90042	036 ***15	50.00
Principal Plac 701 SW 99TI MIAMI, FL 3	H CT 701 SW 99TH CT			66003853					
70 5	pal Place of Business SW 954k CT Apt. #, etc.  3. Mailing Address 701 5W 954k CT Suite, Apt. #, etc.		03032006 Chg-P CR2E034 (11/05)						
City & Stat	mu`. FC	City & State	をし		4. FEI Numb	er	O/ALC	Ap	plied For
Zip 3317	Country	Zip 73124	Country	,	57-113	of Status Desired		\$8.75 Add	
	6. Name and Address of Current	Registered Agent		•	7. Name and	Address of New R	egistered	<u> </u>	
TORRES	SANTOS A		Name	Name					
TORRES, SANTOS A 1307 NE 1 TERRACE HOMESTEAD, FL 33030		Street A	Street Address (P.O. Box Number is Not Acceptable)						
								<u></u>	
			City				FL	- 1	
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									
	E NOWEL FEE 10 6450 00	9. Election Campai			00 мау Ве				
	E.NOW!!!_EEE IS.\$150.00 ay 1, 2006 Fee will be \$550.0			Adde	ed to Fees				-
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF	ICERS AN	D DIRECTORS	S IN 11
TITLE NAME	PD TORRES, SANTOS A	☐ Delete	TITLE NAME					Change	☐ Addition
STREET ADDRESS	1307 NE 1 TERRACE		STREET ADDRESS						
CITY-ST-ZIP	HOMESTEAD, FL 33030		CITY-ST-ZIP						
TITLE		☐ Delete	THILE					Change	Addition
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition
NAME		□ Ocicie	NAME					C1 Oldinge	[ ] Addition
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	THTLE					Change	☐ Addition
NAME STREET ADORESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	☐ Addition
NAME			. NAME						
STREET ADDRESS			STREET ADDRESS						1
CITY-ST-ZIP			CITY-ST-ZIP						- L
TITLE NAME		☐ Delete	TITLE	ĺ				Change	Addition
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-\$1-ZIP						i
indicated	certify that the information supplied with l on this report or supplemental report is poration or the receiver or trustee empt	true and accurate and that n	ny signature shall h	ave the s	same legal effe	ct as if made under o	oath: that I	am an officer	or director



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 31, 2006

ARIEL DRYWALL CORPORATION 701 SW 95TH CT MIAMI, FL 33174

Subject: ARIEL DRYWALL CORPORATION

Reference Number:

P02000113544

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RM ANNUAL REPORTS SECTION