

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

01-26-2006 90042 036 \*\*\*150.00

**DOCUMENT # P02000113544**

1. Entity Name  
**ARIEL DRYWALL CORPORATION**



Principal Place of Business  
**701 SW 99TH CT  
MIAMI, FL 33174**

Mailing Address  
**701 SW 99TH CT  
MIAMI, FL 33174**

**66003853**



2. Principal Place of Business  
**701 SW 95th CT**

3. Mailing Address  
**701 SW 95th CT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03032006

Chg-P

CR2E034 (11/05)

City & State  
**Miami, FL**

City & State  
**Miami, FL**

4. FEI Number  
**57-1136393**

Applied For  
Not Applicable

Zip  
**33174**

Country  
**USA**

Zip  
**33174**

Country  
**USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**TORRES, SANTOS A  
1307 NE 1 TERRACE  
HOMESTEAD, FL 33030**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
TORRES, SANTOS A  
1307 NE 1 TERRACE  
HOMESTEAD, FL 33030** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE: **SANTOS A TORRES**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-3-06**

Date

**786-299-3074**

Daytime Phone #



ATTACHMENT

66003853

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 **has not been filed** 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