

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90111 004 ***150.00

DOCUMENT # P02000114564

1. Entity Name
GAV DRYWALL INC.



Principal Place of Business
7507 BEACH BLVD #2001
JACKSONVILLE FL 32216

Mailing Address
7507 BEACH BLVD #2001
JACKSONVILLE FL 32216

30033897



2. Principal Place of Business 3000 CORONET LANE
3. Mailing Address 3000 CORONET LANE

Suite, Apt. #, etc. Apt 172
Suite, Apt. #, etc. APT. 172

City & State JACKSONVILLE, FLORIDA
City & State JACKSONVILLE FL

Zip 32207 **Country** USA
Zip 32207 **Country** USA

4. FEI Number 82 05 88 142

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GROZDEV, ANDREY
7507 BEACH BLVD #2001
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name GROZDEV ANDREY
Street Address (P.O. Box Number is Not Acceptable) 3000 CORONET LANE
Apt. 172
City JACKSONVILLE **FL** **Zip Code** 32207

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 ANDREY GROZDEV **PREZIDENT** **24/02/03**
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	GROZDEV, ANDREY	7507 BEACH BLVD #2001	JACKSONVILLE FL 32216	<input type="checkbox"/>
V	GAYDARZHI, IVAN	7507 BEACH BLVD #2001	JACKSONVILLE FL 32216	<input type="checkbox"/>
S	GROZDEV, VASILY	7507 BEACH BLVD #2001	JACKSONVILLE FL 32216	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	GROZDEV ANDREY	3000 CORONET LANE #172	JACKSONVILLE, FL 32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	GAYDARZHI IVAN	7507 BEACH BLVD #2107	JACKSONVILLE, FL 32208	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	GROZDEV VASILY	3000 CORONET LANE #172	JACKSONVILLE, FL 32207	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #