2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000123353

1. Entity Name
LUCKY DRYWALL, CORP.

Principal Place of Business	Mailing Address
1024 SW 10TH ST MIAMI, FL 33130	1024 SW 10TH ST MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

4U0J2U16

04302008   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
32-0043544		Not Applicable

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

6. Name and Address of Current Registered Agent

VEGA, GERMAN
1024 SW 10TH ST
MIAMI, FL 33130

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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, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	VEGA, GERMAN
STREET ADDRESS	1024 SW 10TH ST
CITY-ST-ZIP	MIAMI, FL 33130

TITLE	VD
NAME	VEGA, NORMA
STREET ADDRESS	1024 SW 10TH ST
CITY-ST-ZIP	MIAMI, FL 33130

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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STREET ADDRESS	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #