2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000126281 VIC'S DRYWALL, INC.



Principal Place of Business

1607 W. BERESFORD AVE DELAND, FL 32720

Mailing Address

PO BOX 5185 DELTONA, FL 32728

FILED Apr 02, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03022007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3883853 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, VICTOR 1607 W. BERESFORD AVE DELAND, FL 32720

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3-23-07

Daytime Phone #

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 agent. SIGNATURE Signature, typed or printed name of registered agent and nite if applicable (NOTE, Registered Agent signature required when reinstating) DATE					
				\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP HTLE	OFFICERS AND DIRECT PD HERNANDEZ, VICTOR 1607 W BEREFORD AVE DELAND, FL 32720 SD	CTORS			U00000688028 04/10/07-80063-016 150.00
NAME STREET ADDRESS CITY+ST-ZIP	HERNANDEZ, GRABIEL 1607 W BEREFORD AVE DELAND, FL 32720				
NAME STREET ADDRESS CITY+ST-ZIP					NOT WRITE
NAME. STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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.					

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NAME OF SIGNING OFFICER OR DIRECTOR