

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132875

FILED  
Jul 03, 2006  
Secretary of State

Entity Name: GONZALEZ DRYWALL SERVICE INC.

**Current Principal Place of Business:**

4635 SOLANDRA CIRCLE WEST  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

5331 DUGDALE ROAD  
JACKSONVILLE, FL 32210 US

**Current Mailing Address:**

4635 SOLANDRA CIRCLE WEST  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

5331 DUGDALE ROAD  
JACKSONVILLE, FL 32210 US

FEI Number: 47-0901232

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALEZ, JOSE R  
4635 SOLANDRA CIRCLE WEST  
JACKSONVILLE, FL 32210 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GONZALEZ, JOSE  
Address: 4635 SOLANDRA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: S ( ) Delete  
Name: GONZALEZ, SHARYN  
Address: 4635 SOLANDRA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32210 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: GONZALEZ, JOSE R  
Address: 4635 SOLANDRA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP (X) Change ( ) Addition  
Name: GONZALEZ, SHARYN  
Address: 4635 SOLANDRA CIRCLE WEST  
City-St-Zip: JACKSONVILLE, FL 32210 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARYN M GONZALEZ

VP

07/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date