

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

02-20-2006 90056 026 ***150.00
P03000007266

FILED

06 MAY -8 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

40015601

06-29-2005 90003 018 150.00

DOCUMENT # P03000007266
1. Entity Name
SKY DRYWALL INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
17950 SW 143 CT			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
MIAMI, FL			
Zip	Country	Zip	Country
33177			

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For	
01-0764186		Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
SOLANO, TIMOTEO
Street Address (P.O. Box Number is Not Acceptable)
17950 SW 143 CT
City
MIAMI
FL
Zip Code
33177

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 Timoteo Solano SOLANO, TIMOTEO 2/6/2006
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SOLANO, TIMOTEO
STREET ADDRESS	17950 SW 143 ST
CITY-ST-ZIP	MIAMI, FL 33177-7663
TITLE	
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11.

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CITY-ST-ZIP	

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IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Timoteo Solano SOLANO TIMOTEO, PRESIDENT 2/6/2006 (786) 402-0517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SKY DRYWALL INC
17950 SW 143rd Court
Miami, FL 33177

PRR 2/3

May 1, 2006

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

REF: P03000007266
SKY DRYWALL INC

Dear Sirs:

Thank you for your letter of February 22, 2006.

On July 25, 2005 we sent you a letter requesting a waiver of the \$400.00 late payment fee for the 2005 UBR, because the Corporation was dissolved on March 28, 2005, and the dissolution revoked on June 16, 2005. Enclosed please find a copy of that letter.

Please let us know about your decision on the 2005 issue; but please have into consideration the fact that the Corporation was dissolved while the UBR was not past due.

Sincerely,



Timoteo Solano
President

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SKY DRYWALL INC
17950 SW 143rd Court
Miami, FL 33177

July 25, 2005

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

REF: P03000007266
SKY DRYWALL INC

Dear Sirs:

Thank you for your correspondence of June 30, 2005.

We wish to request a waiver of the late fee, because this corporation was dissolved on March 30, 2005, and the Annual Report was not needed because of that.

However, recently the Articles of Revocation of Dissolution under section 607.1404, Florida Statutes, were filed, and it was then when we filed the Report.

We thank you in advance for your understanding.

Sincerely,


Timoteo Solano
President