

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012978

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: HORACIO SERVIN DRYWALL, INC.

**Current Principal Place of Business:**

2509 APPY LN.  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

2509 APPY LN.  
APOPKA, FL 32712

**New Mailing Address:**

FEI Number: 05-0548661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SERVIN, HORACIO  
2509 APPY LN.  
APOPKA, FL 32712 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: POZAS, SERGIO  
Address: 1188 HELEN ST  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S ( ) Delete  
Name: MONTERO-AGUILAR, GABRIEL I  
Address: 5740 OLEANDER DR  
City-St-Zip: ORLANDO, FL 32807

Title: P (X) Delete  
Name: SERVIN, HORACIO  
Address: 2509 APPY LANE  
City-St-Zip: APOPKA, FL 32712 US

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

Title: VP (X) Change ( ) Addition  
Name: POZAS, SERGIO  
Address: 1188 HELEN ST  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: P (X) Change ( ) Addition  
Name: SERVIN, HORACIO  
Address: 2509 APPY LANE  
City-St-Zip: APOPKA, FL 32712 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HORACIO SERVIN

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04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date