

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000063594

FILED
Apr 30, 2004
Secretary of State

Entity Name: ALVAREZ-FLORES DRYWALL, INC.

Current Principal Place of Business:

4083 SUNBEAM ROAD
1602
JACKSONVILLE, FL 32257

New Principal Place of Business:

4112 HOLLISTER PLACE
JACKSONVILLE, FL 32257

Current Mailing Address:

4083 SUNBEAM ROAD
1602
JACKSONVILLE, FL 32257

New Mailing Address:

4112 HOLLISTER PLACE
JACKSONVILLE, FL 32257

FEI Number: 56-2367287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, LUIS F
4083 SUNBEAM ROAD
1602
JACKSONVILLE, FL 32257

Name and Address of New Registered Agent:

ALVAREZ, LUIS F
4112 HOLLISTER PLACE
JACKSONVILLE, FL 32257

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: LUIS F ALVAREZ

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALVAREZ, LUIS F
Address: 4083 SUNBEAM ROAD, #1602
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALVAREZ, LUIS F
Address: 4112 HOLLISTER PLACE
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIS F ALVAREZ

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date