

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103279

Entity Name: LATIN DRYWALL, CORP.

FILED
Aug 07, 2006
Secretary of State

Current Principal Place of Business:

6500 SW 16TH COURT
POMPANO BEACH, FL 33068

New Principal Place of Business:

1062 SW JENNIFER TERRACE
PT. S. LUCIE, FL 34953

Current Mailing Address:

6500 SW 16TH COURT
POMPANO BEACH, FL 33068

New Mailing Address:

1062 SW JENNIFER TERRACE
PT. ST. LUCIE, FL 34953

FEI Number: 20-0244069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAAVEDRA, ANA M
6500 SW 16TH COURT
POMPANO BEACH, FL 33068 US

Name and Address of New Registered Agent:

SAAVEDRA, ANA M
1062 SW JENNIFER TERRACE
PT. ST. LUCIE, FL 34953 US

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: ANA SAAVEDRA

08/07/2006

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: PD () Delete
Name: SAAVEDRA, ANA M
Address: 6500 SW 16TH COURT
City-St-Zip: POMPANO BEACH, FL 33068

Title: SD () Delete
Name: CHACON, JOSE F
Address: 6500 SW 16TH COURT
City-St-Zip: POMPANO BEACH, FL 33068

Title: TD () Delete
Name: GRANADOS, REINALDO C
Address: 6500 SW 16TH COURT
City-St-Zip: POMPANO BEACH, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAAVEDRA, ANA M
Address: 1062 SW JENNIFER TERRACE
City-St-Zip: PT. ST. LUCIE, FL 34953

Title: SD (X) Change () Addition
Name: CHACON, JOSE F
Address: 1062 SW JENNIFER TERRACE
City-St-Zip: PT. ST. LUCIE, FL 34953

Title: TD (X) Change () Addition
Name: GRANADOS, REINALDO C
Address: 1062 SW JENNIFER TERRACE
City-St-Zip: PT. ST. LUCIE, FL 34953

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: ANA SAAVEDRA

PD

08/07/2006

Electronic Signature of Signing Officer or Director

Date