

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000118308

**FILED**  
**Apr 20, 2005**  
**Secretary of State**

**Entity Name:** ADRIAN LOPEZ DRYWALL AND FINISHING INCORPORATED

**Current Principal Place of Business:**

455 N SEARCY  
BARTOW, FL 33831 US

**New Principal Place of Business:**

6178 PINE TREE DRIVE  
FORT MEADE, FL 33841 US

**Current Mailing Address:**

PO BOX 1643  
BARTOW, FL 33831 US

**New Mailing Address:**

6178 PINETREE DRIVE  
FORT MEADE, FL 33841 US

FEI Number: 45-0525640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOPEZ, ADRIAN  
455 N SEARCY AVE  
BARTOW, FL 33831 US

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

LOPEZ, ADRIAN  
6178 PINETREE DRIVE  
FORT MEADE, FL 33841 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: ADRIAN LOPEZ

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: LOPEZ, ADRIAN  
Address: P.O. BOX 1643  
City-St-Zip: BARTOW, FL 33830 US

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

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 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: ADRIAN LOPEZ

PRES

04/20/2005

Electronic Signature of Signing Officer or Director

Date