2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 21, 2004
Secretary of State

DOCUMENT# P03000118833

Entity Name: ESMERALDA DRYWALL INC

Current Principal Place of Business:

15420 LIVINGSTON AVE
APT 2201
LUTZ, FL 33559 US

New Principal Place of Business:

2918 E 147TH AVE
LUTZ, FL 33559 US

Current Mailing Address:

15420 LIVINGSTON AVE
APT 2201
LUTZ, FL 33559 US

New Mailing Address:

2918 E 147TH AVE
LUTZ, FL 33559 US

FEI Number: 20-0322697 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTINEZ, ESMERALDA
15420 LIVINGSTON AVE
APT 2201
LUTZ, FL 33559 US

Name and Address of New Registered Agent:

MARTINEZ, ESMERALDA
2918 E 147TH AVE
LUTZ, FL 33559 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: ESMERALDA MARTINEZ 10/21/2004
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: P ( ) Delete
Name: MARTINEZ, ESMERALDA
Address: 15420 LIVINGSTON AVE #2201
City-St-Zip: LUTZ, FL 33559 US

Title: ST ( ) Delete
Name: MAGALLON, RICARDO
Address: 15420 LIVINGSTON AVE #2201
City-St-Zip: LUTZ, FL 33549 US

Title: ST ( ) Delete
Name: ALVAREZ, MOISES
Address: 15420 LIVINGSTON AVE. #1515
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MARTINEZ, ESMERALDA
Address: 2918 E 147TH AVE
City-St-Zip: LUTZ, FL 33559 US

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

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: ESMERALDA MARTINEZ PRES 10/21/2004
Electronic Signature of Signing Officer or Director Date