## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000122255

Entity Name: CHEMA DRYWALL, INC.

FILED May 03, 2006 Secretary of State

	OHEMIX	) (				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
1703 W. H TAMPA, F	HANLON ST. L 33604 US	3				
Current N	lailing Addres	s:	New Maili	New Mailing Address:		
1703 W. H TAMPA, F	IANLON ST. L 33604 US	3				
FEI Number	: 20-0353756	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
GARCIA, I 1703 W H. TAMPA, F	ANLON ST	3				
	e named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Agent			ent		Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () GARCIA, MANU 1703 W HANLO TAMPA, FL 336	N ST.	Title: Name: Address: City-St-Zip:	(	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	V () JURADO, GERA 2414 STUART S TAMPA, FL 336	ST.	Title: Name: Address: City-St-Zip:	TS ( ARROYO, RA 2403 DURHA TAMPA, FL 3	MM ST.	
Title: Name: Address: City-St-Zip:	TS () ARROYO, RAU 2403 DURHAMI TAMPA, FL 330	M ST.	Title: Name: Address: City-St-Zip:	JURADO, MIC	ILON STREET	
Title: Name: Address: City-St-Zip:	V (X) JURADO, MIGU 1703 W. HANLO TAMPA, FL 336	ON STREET	Title: Name: Address: Citv-St-Zip:	(	( ) Change( ) Addition	

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: MANUEL GARCIA P 05/03/2006